



Pressure Ulcers Prevention

This leaflet offers information about the prevention of pressure damage during your time in hospital. If you have any further questions or concerns, please speak to the staff member in charge of your care.

What is a Pressure Ulcer?

A pressure ulcer or bed sore is localised injury to the skin and/or underlying tissue usually over a bony prominence caused by two forces: pressure and shear. They are caused by prolonged pressure or shearing against the skin which stops the blood supply therefore damaging the skin or underlying tissue.

Patients in hospital are at a higher risk of developing pressure damage as they are often less mobile due to being unwell or having had an operation.

Pressure damage is a problem as it can result in a wound which may get infected, be painful, cause a longer stay in hospital and restrict a patient's mobility further.

The most common risk factors for a pressure ulcer to develop are immobility, weight, continence status, age, reduced nutritional intake, poor circulation, certain medical conditions such as diabetes, stroke and neurological conditions.

What are the signs and symptoms?

A pressure ulcer will usually occur over a bony prominence or if there is an external force of pressure such as drains or tubing which could cause damage to the patient's skin. The initial signs of a pressure ulcer can be non-blanching redness or pain over a bony prominence that has sustained pressure.

A pressure ulcer can vary from an area of intact red skin to a wound that extends through all the layers of skin and be very extensive. The emphasis should always be on prevention and early detection, so pressure ulcers do not form.

A pressure ulcer can form in a matter of hours or sometimes damage can occur to the underlying tissue and move outwards towards the skin so may take several days to present.

What interventions are available?

St George's University Hospitals NHS Foundation Trust is committed to the early assessment of patients and the prevention of pressure damage in our hospitals. Patients are encouraged to participate in care and decisions regarding the prevention of pressure ulcers. This is because a partnership in care results in better outcomes for the

patient. Sometimes pressure ulcers are not always preventable and if they develop the patient may need management of the damaged skin or wound with dressings. It is important that the same steps taken to prevent pressure ulcers are continued during the treatment of a pressure ulcer.

In the hospital patients that are at risk will have their skin inspected regularly, have a pressure relieving mattress and be encouraged to reposition regularly or if patients are unable to change their position, they will be assisted by nursing staff/therapist.

You should ask your doctor or nurse if you are worried about pressure ulcer development and always inform a member of staff if you notice any discoloured areas of skin or pain.

What can be done to help?

- 1. Keeping moving. This is the most important aspect in preventing pressure ulcers. If patients are not able to change their position independently staff will need to assist them in doing so every two to four hours.
- 2. Sitting correctly. Ensuring patients are sitting well in a chair with a 90-degree angle at their hips and knees. Patients at risk of developing a pressure ulcer should not sit in a chair for longer than two hours at a time.
- 3. Regular skin inspection and care. Nursing staff/carers should be checking patient's skin at least daily for any signs of pressure damage and should maintain a good skin care regime ensuring skin is well moisturised.
- 4. Eating and Drinking. A poor nutritional status increases the risk of pressure ulcer development and can impair healing in any existing pressure damage.

Useful sources of information

European Pressure Ulcer Advisory Panel- www.epuap.org

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

Tel: 020 8725 2453 Email: pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health. **Web:** www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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