

# Pressure Ulcer Prevention

## Patient Information

Tissue Viability Department



The Patient Information Leaflets page on the Trust website is available on the link:  
<https://www.wwl.nhs.uk/patient-information-leaflets> or scan the QR code.

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**Our Values****People at  
the Heart****Listen and  
Involve****Kind and  
Respectful****One  
Team**

## What is a Pressure Ulcer?

Pressure ulcers (also known as 'bed sores' or 'pressure sores') are areas of damage to skin and underlying tissue. They are usually caused by sitting or lying in one position for too long without moving, or by dragging your skin across a surface. A pressure ulcer can develop in only a few hours. It usually starts with the skin changing colour – it may appear slightly redder or darker than usual. If an ulcer is not treated, it can develop to an open wound, which can then lead to more serious skin problems.

### The most likely places these ulcers occur are:

- buttocks
- heels
- ankles
- spine
- shoulders
- head
- hips

Medical devices such as oxygen masks, casts and catheter tubing may cause an ulcer to develop.

## Appearance

A pressure ulcer may initially appear as a red or darker area that does not disappear once pressure has been removed. This area may also be tender to touch. The skin can also become broken and develop to an open wound.

## Who is affected?

Although pressure ulcers can affect people of any age, those with poor mobility who spend prolonged periods in bed or in a chair are more likely to be affected.

Other factors influencing pressure ulcer development are:

- Poor nutrition
- Anaemia
- Poor circulation
- Incontinence
- Dehydration

## How can we prevent Pressure Sores?

### Skin inspection

Inspect the skin regularly for signs of possible or actual damage. Look for skin that does not go back to its usual colour after weight has been taken off it, or it has become discoloured. Your health care professional will request to inspect your skin whilst you are under the care of Wroughtington, Wigan & Leigh Teaching Hospitals NHS Foundation Trust.

### Surface selection

Pressure-relieving equipment may be recommended by your health care professional. A pressure relieving plan will be agreed and this may include specialist pressure relieving equipment such as specialised cushions, mattresses, or heel off-loading devices. If your condition improves, then the equipment will no longer be needed.

### Keep moving

Anyone at risk of a pressure ulcer should avoid sitting in a chair or bed for prolonged periods without getting up for a walk or changing position. Your health care professional will advise you on an individualised regime that best suits your needs. Anyone in a wheelchair should take weight off any part of the body that has been in contact with the surface of the wheelchair every fifteen minutes by leaning forward and pushing up on the arms of the chair. They should regularly roll from buttock to buttock to relieve pressure.

### Incontinence management

Moisture from sweating or incontinence can weaken the skin, making it more vulnerable to damage. It is important to keep skin clean, dry, and well moisturised. Creams may be used to protect vulnerable areas of the skin from moisture damage. The Moisture associated skin damage leaflet is available to provide further information.

### Nutrition & hydration

- Eating a healthy, balanced, nutritious diet and drinking good amounts of fluid can support wound healing and reduce the risk of infection. Your health care professional can provide you with further advice on dietary intake and provide information leaflets if necessary.

If you, your relatives, or carers have any questions, please speak to a member of nursing staff.

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## Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends, and carers.

## Contact Us

Tel: 01942 822376 (Monday to Friday 9am until 4pm)

The Patient Relations/PALS Manager  
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## Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

1. What are my options?
2. What are the positives and negatives of each option for me?
3. How do I get support to help me make a decision that is right for me?



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## How We Use Your Information

For details on how we collect, use, and store the information we hold about you, please see patient information leaflet, Ref. **Corp 006** How we use your information, this can be found on the Patient Information Leaflets page on the Trust website, see details on the front cover.

This leaflet is also available in audio, large print, Braille, and other languages upon request. For more information, please ask in the department/ward.

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