

Can the nurses help in any other way?

The nurses will help you by using special lifting equipment or slide sheet if you are unable to move yourself.

You may need a special mattress on your bed, heel protection or a cushion in your chair, to help relieve the pressure. The nurses will discuss with you what is best. They are able to contact the Tissue Viability Nurse if specialist advice is needed.

If you develop a severe type of pressure ulcer, an investigation will be carried out.

If you have any other questions,
please ask the nurses and doctors
looking after you.

If you would like this leaflet in large print, braille, audio version or in another language, please contact the Patient Advice and Liaison Service (PALS) on 01872 252793

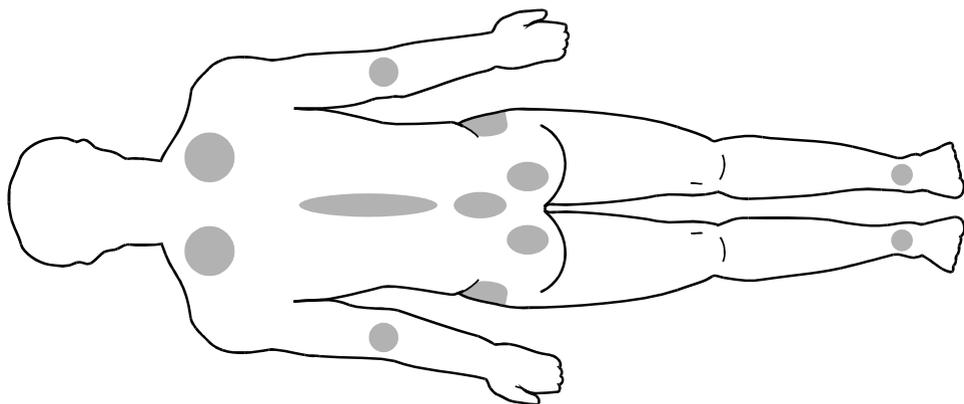


Pressure ulcers and how to prevent them



What is a pressure ulcer?

A pressure ulcer (sore) is an area of damaged skin caused by sitting or lying in one position for a long time without moving. Dragging your skin against the surface of your bed or chair may also cause your skin to break down. If your skin is continually becoming damp this will increase your risk of pressure damage. The areas most at risk are heels, bottom, hips, elbows, ankles, knees and spine as shown in this diagram.



What does a pressure ulcer look like?

The skin may change colour from pink to red/purple and sometimes a blister or a break in the skin develops. Occasionally, a larger cavity (hole) may appear. You may also have some pain or discomfort.

Am I likely to get a pressure ulcer?

You are more likely to get a pressure ulcer if you:

- are very ill
- have to stay in bed for long periods
- are in a wheelchair most of the time
- are unable to move very easily
- have had a stroke

- are a diabetic with poor feeling in your feet
- are not eating and drinking normally
- have poor circulation
- have problems with incontinence.

Your skin will be assessed when you come into hospital and on a regular basis throughout your stay.

How can I help?

Tell the nurse if you:

- begin to feel numb or sore in the areas shown on the diagram
- have had pressure ulcers before
- use pressure relieving equipment at home
- are incontinent and need assistance.

How can I stop a pressure ulcer from starting?

The best way to prevent pressure ulcers is movement, so try to:

- move your body as often as possible while you are in bed
- change your position at least every 2 or 3 hours
- lift your body instead of dragging your skin when you move in the bed or chair
- if you have had an operation, try to change your position frequently once you are awake. This is particularly important if you have had an epidural or other local anaesthetic, which may make the affected part of your body feel numb
- keep your skin clean and dry and don't use talcum powder as this dries up your body's natural oils
- eat a healthy diet to keep your skin in good condition
- don't rub your skin too much, especially on the pressure points.

Certain types of surgery or injury may only allow you to move in a limited way. We will tell you if this applies to you. The nurses will help you to move if you are unable to manage alone. Let the nurse know if you have been incontinent as this can weaken the skin.