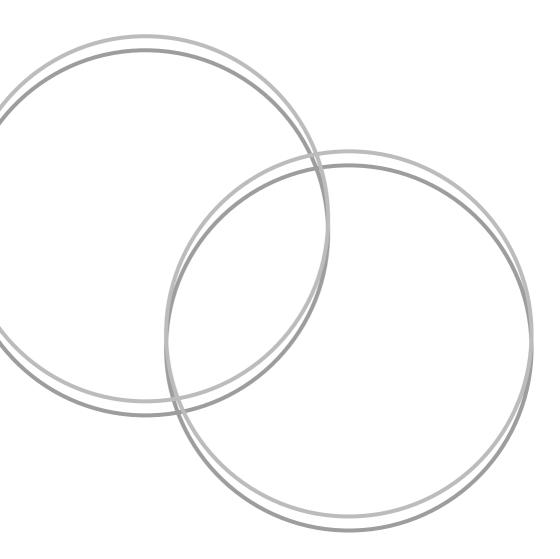


Pressure Ulcers

Information for patients



Are you at risk?

This leaflet has been written to give you, and those caring for you, information and advice on pressure ulcer prevention.

If there is anything else you would like to know, please speak to a member of your care team on the ward.

What is a pressure ulcer?

- A pressure ulcer is an area of damage to the skin and underlying tissue, due to a lack of blood and oxygen supply. The first signs that a pressure ulcer may be forming is usually discoloured skin, that may feel different when you touch the area. This may get progressively worse and eventually lead to an open wound.
- Pressure ulcers are sometimes known as pressure sores or bed sores.
- Pressure ulcers can be very painful. They may need to have frequent dressing changes, which will mean you have to change your daily routine and lifestyle.
- Pressure ulcers can affect your health and slow your recovery.
 They can also lead to a longer hospital stay or admission into hospital from home.

What causes a pressure ulcer?

Pressure ulcers can develop quickly or over a longer period of time. The damage to your skin, and tissue below, occurs due to a lack of oxygen caused by pressure. This happens as a result of unrelieved or prolonged pressure from your body weight, which prevents oxygenated blood from flowing round the area.

Who is at risk of developing pressure ulcers?

You may be at risk of a pressure ulcer if one or more of the following situations relate to you:

- You are confined to a bed or a chair and unable to move yourself on your own or have limited movement.
- You have reduced sensation or poor circulation.
- You have skin that is either dry or frequently moist, through perspiration or loss of bowel or bladder control.
- You have poor nutrition (diet) and hydration (getting enough fluids).
- You are unwell.
- You have a medical device, such as oxygen tubing, face mask, glasses and/or collars, in constant contact with your skin.

To assess your risk of developing a pressure ulcer, a member of your care team will offer to examine your skin and will ask you questions about your general health. This is called a 'risk assessment'. If you are identified as being 'at risk' of developing a pressure ulcer your care team can help develop a plan of care with you, to reduce this risk.

SKINS is an acronym used to promote pressure ulcer prevention during your hospital stay.

Skin inspection

Inspecting your skin means that we can spot early signs of pressure damage.

Your care team can help you or your carers to check your skin for early signs of pressure damage at least once a day. The most important places to check are bony areas and under medical devices and areas of pain, discomfort, or numbness.

Look for skin that doesn't go back to its normal colour after you have taken your weight off it.

Tell your care team immediately if your skin is red or marked, like the pictures below, or if your skin feels sore or you develop an area of blistering.





Keep moving

You can relieve the pressure from vulnerable areas by changing your position regularly.

If you are unwell, it can be difficult to change your position or to move around by yourself.

Try to change your position every hour or two; more often if possible. Avoid sitting in your chair or bed for prolonged periods without getting up for a walk or changing your position.

Your care team are available to help you to change your position if you feel unsafe or have difficulty in repositioning yourself.

Incontinence and moisture management

Moisture from sweating, wounds or incontinence can weaken the skin, making it vulnerable to damage.

It is important that you keep your skin clean, dry and well moisturised.

Creams may be used by your care team to protect vulnerable areas of your skin from moisture damage.

Nutrition and hydration

Eating well and keeping yourself hydrated will help to keep your skin healthy.

Make sure you drink fluids throughout the day and eat a well-balanced diet containing protein, carbohydrates and healthy fat.

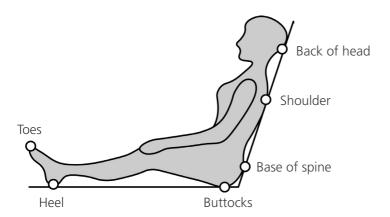
Light meals and snack boxes are available outside of mealtimes, if required. Please ask your care team for further details.

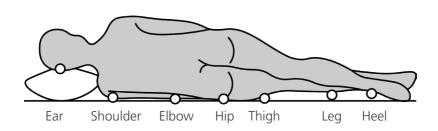
Surface selection

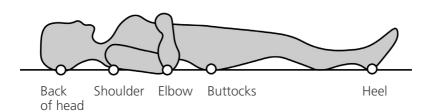
During your stay in hospital or when you are discharged home, you may be given pressure-redistributing equipment. This may be a mattress, chair cushion or heel off-loading boots or pillows.

This equipment is designed to help move the pressure away from vulnerable areas, such as the heels and buttocks. As your condition improves and you are able to move around more, you may no longer need this equipment.

Common areas where pressure ulcers develop







Help us to help you prevent pressure ulcers!

If there is anything else you would like to know, please speak to a member of your care team on the ward.

National guidance and advice

For further advice, please visit:

www.nationalwoundcarestrategy.net/pressure-ulcer/ www.nhs.uk/conditions/pressure-sores/

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

Author: Tissue Viability Service

November 2023 Review: November 2026

Oxford University Hospitals NHS Foundation Trust

www.ouh.nhs.uk/information



Making a difference across our hospitals

charity@ouh.nhs.uk | 01865 743 444 | hospitalcharity.co.uk

OXFORD HOSPITALS CHARITY (REGISTERED CHARITY NUMBER 1175809)

Oxford Hospitals Charity

Leaflet reference number: OMI 91312