

## What is a Pressure Ulcer?

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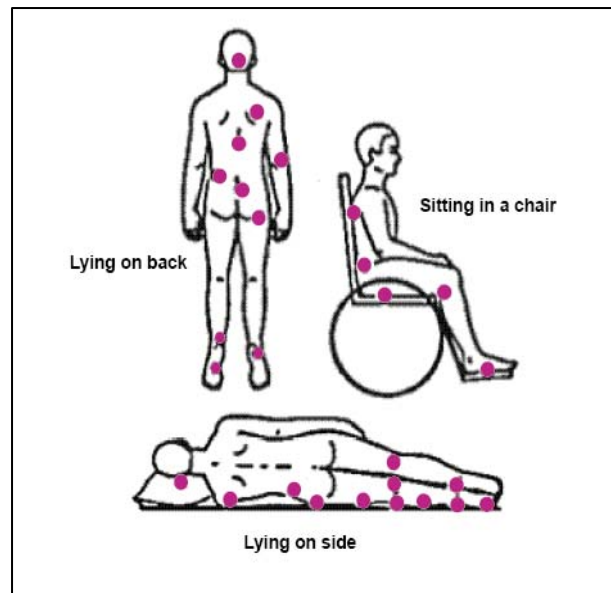
A pressure ulcer (previously called a "bed sore") is an injury to the skin and underlying tissue caused by pressure for a long period of time. A pressure ulcer develops over a bony area of the body such as the sacrum (tailbone), heel, or hip. It may be minor, resulting only in redness of the skin, or it may become an open wound.

### Who is at risk for developing a pressure ulcer?

Any person who remains in the same position for a long time is at risk of developing a pressure ulcer. Elderly persons generally have thinner, more fragile skin, and are therefore at risk for developing pressure ulcers. Certain diseases such as anemia, cancer, diabetes, heart, vascular and kidney disease also are associated with pressure ulcers. Conditions or risk factors that increase the likelihood of developing a pressure ulcer include:

- Prolonged immobility (remaining in the same position for extended periods of time)
- Prolonged exposure to moisture (from incontinence or perspiration)
- Poor nutrition
- Decreased ability to feel pain and/or pressure.

In general, the more risk factors present, the greater the likelihood of developing a pressure ulcer.



**Each spot on the above picture marks an area where a pressure ulcer can develop.**

### How does immobility increase the risk for pressure ulcers?

In general, individuals that are bed or chair-bound experience prolonged pressure and shear or friction that puts them at risk for developing a pressure ulcer. Shear or friction occurs from:

- Skin rubbing against the bed sheets or chair
- Skin being pulled from repeated episodes of sliding down in the bed or chair
- Heels sliding against the bed linens
- Friction on the skin caused by repeated episodes of being pulled up in bed or chair.

## How are pressure ulcers prevented?

In general, prevention is achieved through regular activity, good nutrition, and keeping the skin clean and dry.

### Activity & Pressure Prevention:

- Frequent turning or repositioning (at least every 2 hours while in bed and every 1 hour while sitting in a chair)
- Foam or air mattresses
- Use of pillows for comfort and positioning
- Elbow and heel protectors
- Regular activity including physical therapy if ordered by your physician.

### Nutrition:

- Eating and drinking fluids in sufficient quantities
- Eating foods that supply adequate protein, zinc and vitamins A and C.
- Food rich in zinc include shellfish, fruit juice, baked potato, oatmeal, and spinach.
- Food rich in vitamin A include liver, greens, carrots, egg yolks, and sweet potatoes
- Food rich in vitamin C include oranges, orange juice, strawberries, broccoli, tomatoes, cantaloupe, and lemons.
- Taking a multi-vitamin and nutritional supplements if ordered by your physician.

### Skin Care:

- Moisture barrier creams or sprays
- Frequent cleansing, changing of incontinent patients
- Foam seat cushions (NO "donut" cushions)

In spite of best efforts at prevention, pressure ulcers do sometimes develop. Report skin redness or breaks in the skin to your nurse or physician.

### Notes/Information:

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### *Source:*

Wound, Ostomy, Continence Nurses Society: Guidelines for the Prevention and Management of Pressure Ulcers 2003. Retrieved from [www.wocn.org](http://www.wocn.org)

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