• Avoid using pillows under knees. It puts pressure on patient’s heels.
• Avoid use of water inflated rubber gloves or talcum powder.
• Avoid use of donut shape rings because they may cause venous congestion and edema.
• Do not position directly on hip bone.

6. Eat balanced Diet

In case of absence of balanced diet ask the doctor to prescribe vitamins and mineral supplements. The patient should drink at least eight glasses of water a day (unless fluids are restricted).

7. Can use devices that decrease risk of pressure ulcers.

Special cushions, foam mattress pads, air-filled mattresses and water-filled mattresses can help a person in relieve pressure and protect vulnerable areas from damage.

For more information, please contact

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Monday 2:00 pm to 5:00 pm
Wednesday and Thursday 9:00 am to 12:00 noon
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References

This brochure provides information about pressure sores and their preventive measures. It is designed to respond to questions most frequently asked by patients and their families.
What are pressure sores?
Pressure sores are ulceration of the skin and progressively of the underlying tissues. They are chiefly due to the deprivation of nutrition to the area because of pressure that obstructs the blood supply to the tissue.

It can develop within two hours and usually starts with change in the skin color - redder or darker than usual. If not treated quickly at first stage, it can develop in a few days to an open blister and over a longer period - a deep hole in the flesh.

Who are at a higher risk of getting pressure sores?
- Those who are confined to bed or wheelchair most of the time
- Those who are spending long periods in an armchair
- Those who are unable to move without help
- Those who are elderly or weak and have dry and aging skin
- Those who are unable to feel pressure or pain or are incontinent
- People with poor diet - not enough protein
- Patient who are not mentally alert because of Alzheimer's or heavy sedation

What are the high risk areas where pressure sores may develop?
Sores are most likely to develop at points where the bone is close to the surface. The below picture is showing common sites of pressure ulcers when sitting in a wheelchair/lying in a bed.

What are the causes of skin break down?
1. Pressure or other stresses caused by lying in one position for too long
2. Break in the skin surface for example due to surgery or trauma to the skin
3. Shearing in which skin is pulled away from the tissue under it, caused by sliding down the bed
4. Friction caused by being dragged rather than lifted following which the top layer of skin is rubbed off
5. Moisture for example release of sweat, urine or stool

What are some preventive measures?
1. Avoid friction
   - Lift - don’t slide the patient in bed - use draw sheets or pads to lift when changing positions.
2. Avoid Shear
   - Try not to elevate head end side greater than 30 degree, as being flatter keeps your body from sliding down. Sliding may harm your body.
3. Manage incontinence
   - Cleanse skin as soon as it is soiled.
   - Use lubricant as a barrier to protect skin from urine and stool.
   - If the skin reddens, use a rash ointment.
4. Maintain proper positioning
   - When the patients is lying on side put the pressure off at his/her lower leg by bending knees a little and putting a pillow in between knees and ankles.
   - When the patient is lying on back, keep heels off of the bed with pillow or pad.

Skin care
- Use appropriate incontinence disposable sheets (Sheets and incontinence pads should be crease free)
- Help the patient off the bed or use toilet pan promptly.
- When washing, use soft sponge, cotton or wipe. Do not scrub hard.

Use proper utensils (e.g., sheets and incontinence pads)

Proper Position While On side
- Head of bed elevation Limited to 30 degrees or less
- Proper heel placement

5. Proper Position While On side
- Head of bed elevation Limited to 30 degrees or less
- Proper heel placement

6. Poor nutrition eventually making overweight, underweight or dehydrated (not taking enough fluids)