

# PRESSURE INJURY

## WHAT'S A PRESSURE INJURY?

A pressure injury (a.k.a. a 'bed sore'), is an area of red or broken skin caused by too much pressure, friction, and/or shear on your skin for too long a period of time (see definitions below). This pressure cuts off the blood flow to your skin and causes your skin to die.

- **Pressure:** this is the force of an outside object pushing down or against your skin, pinching your skin between it and your bones, like when you sit or lie in one position for too long;
- **Friction:** this happens when your skin is pulled across another surface, like the damage done to your knees when you slide across carpet in shorts;
- **Shear:** this happens when your skin moves one way and the bones underneath move another, like when you slide down in a chair.

## WHAT ARE THE SIGNS OF A PRESSURE INJURY?

A pressure injury often shows up as a red, warm, tender area that does not go away, or as a blister that is filled with blood or with clear fluid. Depending on how bad the damage is to the skin and deeper tissue, the skin may also develop a dry, hard, black scab.

Pressure injuries are most often found over 'bony prominences' or areas where our bones seem to stick out more.

- Get enough rest/sleep;
- Keep a pillow between your knees and/or ankles to keep them from touching and elevate your heels off of your mattress using a pillow, even if you are on a special mattress;
- Avoid raising the head of the bed greater than 30 degrees, and avoid lying directly on your hips when on your side, i.e. use a 30 degree side lying position;
- Use any specialty mattresses, seating cushions, and other such devices properly and maintain and clean them as per manufacturer's instructions, and;
- Inspect your skin every day for red areas—if there are red areas, check if they are warm, firm, puffy/swollen, or painful. If so, let your health care provider know IMMEDIATELY.

## SPECIALTY DEVICES

Sometimes a specialty mattress, seating cushion, heel boots, elbow protectors, or other such devices are needed to prevent you from getting a pressure injury, or to help you heal an injury.

A physiotherapist or occupational therapist is needed to see what devices are needed. These professionals can also help you to get these specialty devices, which usually have an additional cost that is sometimes covered by private insurance. They will also help you understand how to use and care for your specialty devices.

For more information on pressure injuries, nutrition, wound healing, and for community resources, go to:

[swrwoundcareprogram.ca](http://swrwoundcareprogram.ca)



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“ PREVENTING  
AND MANAGING

# PRESSURE INJURY”

Tips on how to prevent  
and care for your or your  
loved one's pressure injury





## COMMON QUESTIONS

*Such areas include your:*

- Tail bone,
- Hip bones,
- Heels,
- Ankles,
- Knees,
- Elbows,
- Spine,
- Ears,
- Back of the head, and;
- Anywhere your skin is under pressure forces.

## WHAT PUTS ME AT RISK FOR GETTING A PRESSURE INJURY?

There are many known risk factors for getting a pressure injury. *These include:*

- Being bed or chair ridden due to illness or injury;
- Having poorly controlled diabetes, heart disease, blood pressure, anemia, circulation, and/or chronic lung disease;
- Having a spinal cord injury, multiple sclerosis, or paralysis from stroke;
- Having dementia or Alzheimer's or being confused;
- Being dependent on others to change your position and/or not changing your position often enough;
- Poor fluid and/or food intake;
- Being older;
- Taking steroids or medications that make you sleepy;
- Being overweight or underweight, and;
- Having dry skin or skin that is too wet from sweat, wound drainage, saliva, and/or uncontrolled urine, and/or bowel movements.

If you do not correct/address your modifiable risk factors (with the help of your health care team, you will NEVER heal your pressure injury!

## WHAT ARE THE RISKS OF HAVING A PRESSURE INJURY?

*Having a pressure injury puts you at risk for:*

- Being less able to move and complete your activities of daily living;
- Being unable to work or attend school;
- Pain, emotional and psychosocial issues/suffering;
- Prolonged hospitalization and delayed discharge to home or long-term care;
- Development of more pressure injuries;
- Poor or worsening nutrition;
- Wound infection;
- Blood or bone infection;
- Amputation, and/or;
- Death.

## WHAT CAN I DO TO HELP?

You are an important member of your wound care team.

*To heal your pressure injury and/or to keep new ones from happening:*

- Keep your dressings clean and dry. Never leave a wound open to the air;
- Change the dressing as instructed by your nurse and as needed if it gets dirty, falls off, or if it leaks through. If you or a family member, friend, or neighbor is able to change the dressing, you will be taught;

- Recognize the signs of wound infection and get help right away. Signs of infection include: redness/heat/swelling around the wound, increased drainage, drainage that is green or pus and/or foul smelling, increased or new pain, and fever (38°C);
- Stop smoking;
- Eat a well-balanced diet with lots of protein (meat, eggs, nuts), and drink lots of non-caffeinated fluids;
- Take your medications as instructed by your doctor;
- Keep your blood sugars in good control (if you have diabetes);
- Get to and/or maintain a healthy weight;
- Change positions at least every hour when in bed, and at least three times per hour when sitting (even if you are on a special mattress or cushion);
- Avoid sitting or lying on the wound;
- Don't massage or rub any warm, red, tender areas;
- Keep your skin clean and dry. Gently cleaning perineal skin at the time of soiling with a mild non-scented soap and warm water;
- Try to establish a toileting routine to prevent urinary and fecal incontinence;
- Use absorbent pads or incontinence products to manage urinary and/or fecal incontinence and to wick moisture away from the skin;
- Avoid the use of cornstarch or talcum powders to manage moisture—they can cause yeast infections;
- Avoid long, hot baths—short, warm showers using a mild non-scented soap are preferable;
- Moisturize dry skin regularly with a mild, non-scented moisturizer to keep it from cracking;
- Move as much as you can, safely and comfortably, and avoid prolonged bed rest;
- Keep your pain in control;

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