



Health & Safety Alert

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A Brief Guide to Understanding the Risk of Pressure Sores (Bedsore)

What are pressure or bedsore (Decubitus Ulcers)?

Pressure or bedsore are ulcers which may occur on areas of the skin that are under pressure from lying in bed, sitting in a wheelchair, and/or wearing a cast or brace for a prolonged period of time; or in areas that are continually damp.

When does a pressure or bedsore develop?

A bedsore develops when blood supply to the skin is cut off for as little as two hours. As the skin dies, the bedsore first starts as a red, painful area, which if untreated can break open and become infected. A bedsore can become deep, extending into the muscle, and if left untreated can cause death. **Observation and routine skin care are the keys to prevention!**

Who is likely to develop a pressure sore?



- Someone who has had a long illness or life-long disability. This may result in being confined to bed or a chair for long periods.
- Someone who has poor circulation.
- Someone who is under-nourished.
- Someone who is overweight.
- Someone who has difficulty with mobility.
- Someone who is incontinent and left to lie in urine. This can leave skin wet, which makes it more prone to superficial damage.
- Someone who slides or is pulled along a chair or bed regularly.



On Which parts of the body will pressure sores develop?

- Areas more likely to develop pressure sores are heels, elbows, shoulders, and the bony parts of your bottom (the areas that are in contact with your bed or chair, or where two bony areas are in contact with each other).

How are pressures or bedsore prevented?

The best methods of preventing bedsore and preventing progression of existing bedsore include: careful observation, frequent turning and repositioning, providing soft padding in wheelchairs and beds to reduce pressure, and providing good skin care by keeping the skin clean and dry.

Bedsore can be prevented by inspecting the skin for areas of redness (the first sign of skin breakdown). When a pressure sore first appears, it may be no more than a red area, the size of a penny, which feels warmer than the rest of the skin. If this area is pressed, it remains red and does not blanch (go white). For individuals with dark skin, it is the heat that indicates the start of the damage.

Education of caregivers for at-risk persons is the most productive way to prevent pressure ulcers. Steps toward prevention include:

- Identifying individuals at high risk for pressure ulcers;
- Ensuring that people who are immobile change their position at least every two hours to relieve pressure;
- Using items that can help reduce pressure caused by bed sheets and wheelchairs (e.g., pillows, sheepskin, foam padding, and powder);
- Making sure the person eats healthy, well-balanced meals;
- Encouraging daily exercise, including range-of-motion exercises for people who are immobile; and
- Following good skin care, including inspecting the skin every day and keeping skin clean and dry. People with no restraints need to take extra steps to limit areas of moisture.

Can I treat a bedsore?

Your doctor or nurse should be consulted immediately if you suspect the development of a pressure sore.

Specific treatment of a bedsore is determined based on the severity of the condition. Treatment may be more difficult once the skin is broken, and may include:

- Removing pressure on the affected area;
- Protecting the wound with medicated gauze or other special dressings;
- Keeping the wound clean;
- Transplanting healthy skin to the wound area; and
- Medication (e.g., antibiotics to treat infections).

What happens if a pressure or bedsore is left untreated?

When a bedsore is left untreated the bedsore will continue to erode at the skin and muscle tissue and will expose bones and joints. People who have bedsores due to a preexisting health condition already have a decreased immune system and are much more susceptible to the spread of infection from an advanced bedsore stage.

For questions or comments regarding the above Alert, please contact the MUI/Registry Unit at (614) 995-3810.

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