

# Health Education Fact Sheet

*From Nurses for You*

*Nursing Best  
Practice Guideline*

## Taking the Pressure Off: Preventing Pressure Ulcers

Pressure ulcers or bedsores are caused by constant pressure that damages the skin and underlying tissue. They can develop in a very short time period and take longer to heal. They may have a huge impact on your every day life, as normal activities can be restricted while the ulcer heals. Healing these ulcers can be costly to you and the healthcare system.

If you spend long periods of time in a bed, chair or wheelchair and have lost your feeling in your lower body, you maybe at increased risk of getting pressure ulcers. In most cases, pressure ulcers can be prevented. If they do occur, they can be healed.

### *How do pressure ulcers develop?*

There are a number of risk factors that lead to pressure ulcers. Some of the factors include:

- Limitation in movement (e.g., paralysis, acute/chronic illness or surgery).
- Incontinence (loss of bowel and/or bladder control).
- Not having a well-balanced diet.

### *Facts about pressure ulcers:*

- The first sign of a pressure ulcer is reddened skin on fair skinned individuals or purplish/bluish discolouration in darker individuals. It may not be painful.
- A very ill person may develop a pressure ulcer quickly.
- Persons who are confined to a bed may develop ulcers on areas that they lie on such as the tailbone, buttocks (bottom), heels, hips, ankles, shoulder blades, back of the head, ears, elbows and knees. Pressure ulcers may also develop on the buttocks (bottom) of persons who are sitting in a chair or wheelchair for a long time.

### *What can you do to prevent or reduce your risk of developing pressure ulcers?*

#### *If you are confined to bed:*

- Remember that you can best help yourself. Change your position frequently by turning your body. Do this at least every 2 hours. If you cannot move on your own, have someone assist you.
- Avoid lying on your hip. Instead, turn to your side and support yourself with pillows.

- Use pillows or foam wedges to avoid contact between bony areas. Use devices such as heel protectors that will reduce pressure on the heels and ankles.

*If you are confined to chair or wheelchair:*

- Shift your weight every 15 minutes. If you cannot shift your weight, have someone move you at least every hour.
- Do not create your own cushion (e.g., donut type devices) as it will likely just move pressure to a new area. Instead, use pressure-reducing devices. There are many pressure-reducing products designed for seating surfaces to choose from. An occupational therapist or a physiotherapist can suggest an appropriate seating device based on your needs.

*If you are a caregiver for someone who is at risk of developing pressure ulcer, here are some helpful suggestions for you:*

Use lifting devices to move the person during transfer and position changes. Keep the skin and bony areas from rubbing on surfaces. Talk to a nurse, occupational therapist, physiotherapist or doctor regarding the use of transfer techniques, and how to obtain lifting devices and pressure reducing/relieving devices. (**Caution: The use of pressure reducing/relieving devices does not substitute for an appropriate turning schedule.**) If pain is an issue discuss with the nurse or doctor about ways to manage the pain.

*More Tips:*

- Use a mild cleansing product that is pH balanced when bathing and after an episode of incontinence. Use a product which is both a moisturizer and skin barrier protection against moisture to re-hydrate dry skin and to improve resistance to injury.
- Avoid massaging bony areas.
- Eat a balanced diet. Eat fruits, vegetables and foods high in protein and calories. Drink plenty of fluids. If you cannot handle a balanced diet, ask your nurse, doctor or dietitian about nutritional supplements. Consult your doctor about the use of multivitamin tablets.

*What can you do if you develop a pressure ulcer?*

With proper treatment, most pressure ulcers will heal. Healing of pressure ulcers depends on your general health, diet, relieving pressure on the ulcer and careful cleaning and dressing of the wound. Healing wounds also requires a team effort that includes healthcare experts, you and your caregiver. The treatment plan will be based on the results of a wound assessment, a physical exam and health history.

This information fact sheet is developed as a supplement to the RNAO Nursing Best Practice Guidelines on *Risk Assessment and Prevention of Pressure Ulcers* and *Assessment and Management of Stage I to IV Pressure Ulcers*. The intent is to increase your knowledge and involvement in making decisions about your health. These nursing best practice guidelines are available for public viewing and free download at [www.rnao.org/bestpractices](http://www.rnao.org/bestpractices).



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*This project is funded by the  
Ontario Ministry of Health and Long-Term Care*