

Preventing pressure damage (pressure sores)



**Marie
Curie**

Information for people living with
a terminal illness and those close
to them

Introduction

This leaflet explains what pressure damage is and ways you can try to prevent it. It's best to prevent pressure damage, because it can take a long time to heal.

If pressure damage is not managed or treated, you may have complications that can be harmful, such as an infection. In extreme cases, some of these complications may need treatment in a hospital or have a longer-term impact on your quality of life.

In this booklet, we use the words **pressure damage** to talk about skin damage caused by pressure. You may call pressure damage, or hear it called, a pressure sore, pressure ulcer, bedsore, or pressure injury.

It is important to talk to your doctor, nurse or other healthcare professionals involved in your care about ways you can look after your skin.



iStock

* Calls are free from landlines and mobiles. Your call may be recorded for training and monitoring purposes.

Contents

| | |
|--|----|
| What is pressure damage? | 3 |
| What are the signs of pressure damage? | 4 |
| What to do if you think your skin is damaged | 5 |
| Who is at risk of pressure damage? | 6 |
| What parts of the body are most at risk? | 7 |
| Ways to prevent pressure damage | 8 |
| How Marie Curie can help | 13 |
| About this information | 15 |

What is pressure damage?

Pressure damage is caused by blood supply to the skin being reduced, after the skin is under pressure for a long time. It is usually caused by:

- sitting or lying in one position for too long without moving or
- a device, such as a catheter bag strap or oxygen mask, pressing against your skin for a long time.



iStock

What are the signs of pressure damage?

It can take only a few hours for pressure damage to develop. It usually starts with the skin in the affected area changing colour. These are signs look out for:

- Discoloured patches of skin that may not fade when you press them:
 - People with lighter skin tones may get red patches.
 - People with darker skin tones may get purple or blue patches, or patches that are a different colour than the surrounding area – usually darker.
- An area of skin that is a different temperature to the surrounding skin – usually warmer.
- An area of skin that feels harder or softer than the surrounding skin.
- Swelling, pain or itchiness in the affected area.

If pressure damage gets worse, it can develop into a blister or open wound. You can help stop this happening by looking after the affected area (see page 9).

What to do if you think your skin is damaged

If you notice any changes to your skin, it's important to speak with your doctor, nurse or another healthcare professional soon as possible.

You can also follow the guidance in this leaflet to help look after the affected skin.

It can be difficult to completely prevent pressure damage. But, even if it develops, your healthcare team can help treat it and support you.



iStock

Who is at risk of pressure damage?

Anyone can develop pressure damage. You are more at risk if you:

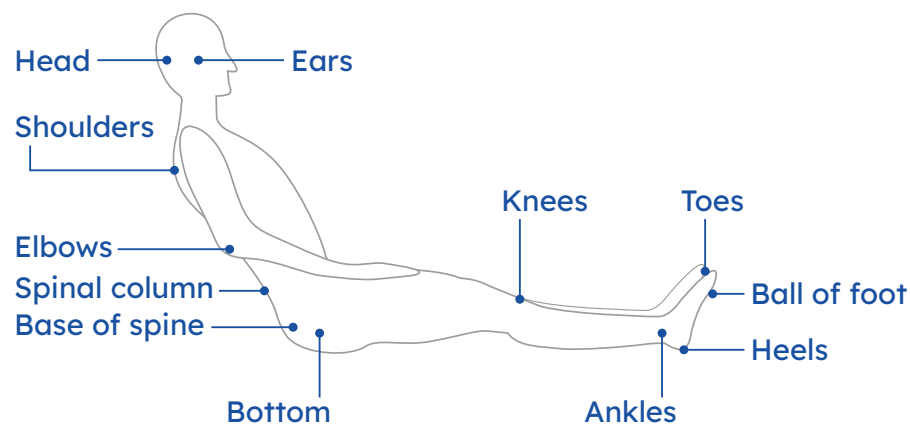
- find it hard to move – for example, because of age, illness, an underlying medical condition, or recent surgery
- cannot change your position without help
- cannot feel sensations, including pain, in part or all of your body
- have a poor appetite or diet, do not drink enough water, or both
- have trouble controlling your bladder or bowel (incontinence)
- have damage to your spinal cord, and cannot move or feel the areas shown in the figure on page 7
- have a medical condition that affects blood supply, makes skin more fragile, or makes it more difficult to move – for example, diabetes or problems with circulation to your legs and feet
- have had pressure damage before.

What parts of the body are most at risk?

Pressure damage is most likely to develop where a part of the body has contact with a surface for a long time.

The labels on the picture below show the body parts where pressure damage may develop. These areas are at risk when you are sitting up and when lying in bed.

Where pressure damage may develop on the body



Ways to prevent pressure damage

The most important thing you can do to avoid pressure damage is follow the practical guidance in the SSKINS checklist below.

SSKINS checklist

It may be that not every suggestion in this checklist is suitable for you. Talk to your doctor, nurse or another healthcare professional to find out what will work best for you.

Skin

Checking your skin:

- Check your skin for signs of damage at least twice a day – once before getting up, and once later in the day or before you go to bed at night.
- If you use medical devices, such as oxygen or feeding tubes and surgical drains, it is important to check the skin under these devices.
- You may find using a mirror is helpful to check different areas. Or you could ask for the help of a carer or someone you trust.

If you find any changes, it's important to speak with your doctor, nurse or another healthcare professional as soon as possible.

Looking after damaged skin:

- If an area of your skin is discoloured or broken, try to avoid sitting or lying on the area.
- Keep the skin clean and dry. Pat your skin to dry it instead of rubbing, and make sure it is completely dry.
- Make sure you check anywhere skin meets skin, such as under breasts or in the genital area. Keep them clean and dry.
- Do not rub or massage the skin.
- Do not use talcum powder or perfumed toiletries.

Surface

Surface means anything your skin is in contact with for a length of time without moving. It could be something you are lying or sitting on.

You can use various aids, cushions and mattresses to help redistribute pressure on your skin. Ask your doctor, nurse or healthcare professional for advice about what might work for you.

Here are some other things to try:

- Place pillows in between your ankles and knees when in bed.
- Use a lightweight duvet cover or blankets on your bed.

Keep moving (if you can)

Try to change your position regularly when you are in bed or sitting down. Your doctor, nurse, or another healthcare professional can talk to you about how often you should try to move.

Changing position and moving around might include:

- moving from one buttock to another when sitting
- moving from lying on your back to lying on your side when in bed – even a slight tilt can make a difference.

Small changes to your lifestyle can make a big difference. For example, if you can, try getting up and walking around during television advert breaks.

If you are caring for someone who needs your help to change position, you may be able to use aids such as a slide sheet or standing aid. It's important to ask a health or social care professional for advice before moving someone.



iStock

Incontinence

Incontinence means you may not have control over your bladder, bowels, or both. If left in contact with the skin, urine and faeces (wee and poo) can irritate or damage it. This can cause the skin to become weaker, which may increase the risk of pressure damage. There are things you can do to reduce this risk:

- Try to keep your skin dry. Be aware of moisture building up between the buttocks and in the rest of the genital area. Moist skin can increase the risk of skin damage, especially if your skin is damp due to:
 - not being properly dried
 - incontinence
 - sweat
 - a wound that is weeping.
- Change incontinence pads and clean the skin as soon as possible when wet or dirty.
- Ask your doctor, nurse or another healthcare professional about using barrier creams.

If you have any problems with your bladder or bowels, ask a healthcare professional for help and advice. At home, this might be a district nurse or GP. In hospital or hospice, this could be your ward staff.

Nutrition and hydration (eating and drinking)

- Try to eat a healthy diet. If you are unable to eat large meals, it can be better to eat small meals more often.
- There are drinks and food supplements available that have added calories or protein. If you think you may need these, speak to your GP about what might be suitable for you.
- Try to drink up to eight glasses or cups of fluid per day. This will help to keep your skin hydrated. Drinks might include water, tea or coffee.

Self-care or shared care

It's important that everyone involved in your care knows what makes you more likely to develop pressure damage. Everyone needs to recognise the risks and try to make any of the necessary changes.

If you have diabetes or problems with circulation to your legs and feet, you have a higher chance of developing pressure damage. It's important that you, your healthcare team, and anyone else caring for you recognises this risk. You and the people caring for you can try different ways to prevent pressure damage, including the things we talk about in this booklet.

If you have had, or do have, pressure damage, it is important that everyone involved in your care knows. Tell them about any equipment you use, to make sure they can recognise the risks and make any necessary changes to your care.

How Marie Curie can help

Marie Curie is here for anyone with an illness they're likely to die from, and those close to them. Whatever the illness, wherever you are, we're with you to the end.

Marie Curie Support Line

0800 090 2309*

Our free Support Line is for anyone with an illness they're likely to die from and those close to them. Our team, including nurses and specialist Energy Support Officers, offers practical and emotional support on everything from symptom management and day-to-day care to financial information and bereavement support. Our Support Line is available in over 200 languages, or via webchat at mariecurie.org.uk/support-line

Marie Curie Companions

Companion volunteers focus on what's important to you and those close to you. It might be accompanying you to appointments, being there to listen to how you're feeling without judgment, or stepping in so family or carers can take a break. Companions provide the emotional and practical support you want – at home, in hospital or over the phone. mariecurie.org.uk/companions

Marie Curie Telephone Bereavement Service

Get ongoing bereavement support over the phone from the same volunteer. You can access up to six sessions of 45 minutes. We can help if your bereavement was expected, happened recently or was some time ago. mariecurie.org.uk/bereavement

* Your call may be recorded for training and monitoring purposes.

Marie Curie Online Community

Our Online Community is a space for you to share thoughts, feelings and experiences. It's moderated by the Marie Curie Support Line team, who can also help answer your questions.

community.mariecurie.org.uk

Marie Curie Hospice care where it's needed

Our hospices

Our hospices help people with any illness they're likely to die from, and the people close to them, receive the support they need. From medical and physical support to psychological and emotional care, whatever your illness, at whatever stage of the journey, we help you to live the best life possible, right to the end.

mariecurie.org.uk/hospices

Hospice care at home

Our nurses, healthcare assistants and other healthcare professionals bring the clinical, practical and emotional help you need to you, in the comfort of your own home. And we offer support to the people close to you too – from reassurance and practical information to letting them take a break.

mariecurie.org.uk/nurses

Looking for more information?

If you found this booklet useful, we have free information available online at mariecurie.org.uk/information or to order at mariecurie.org.uk/publications

About this information

This booklet was produced by Marie Curie's Information and Support team. It has been developed with people affected by terminal illness, and health and social care professionals.

If you'd like the list of sources used to create this information, please email review@mariecurie.org.uk or call the free Marie Curie Support Line on **0800 090 2309***.

Notice

The information in this publication is provided for the benefit and personal use of people with a terminal illness, their families and carers.

This information is provided as general guidance for information purposes only. It should not be considered as medical or clinical advice, or used as a substitute for personalised or specific advice from a qualified medical practitioner. In respect of legal, financial or other matters covered by this information, you should also consider seeking specific professional advice about your personal circumstances.

While we try to ensure that this information is accurate, we do not accept any liability arising from its use. Please refer to our website for our full terms and conditions.

Did you find this information useful?

If you have feedback about this booklet, please email us at review@mariecurie.org.uk or call the free Marie Curie Support Line on **0800 090 2309***.

Your notes

Marie Curie

Marie Curie is the UK's leading end of life charity. Whatever the illness, wherever you are, we're with you to the end.



0800 090 2309*

Marie Curie provides free support over the phone in over 200 languages, and via webchat, to anyone with an illness they're likely to die from and those close to them. Our team, including nurses and specialist Energy Support Officers, offers practical and emotional support on everything from symptom management and day-to-day care to financial information and bereavement support. Visit mariecurie.org.uk/support

We also have an Online Community where you can share thoughts, feelings and experiences at community.mariecurie.org.uk

We can't do it without you

Our free information and support services are entirely funded by your generous donations. Thanks to you, we can continue to offer people what they need, when they need it. To support us, visit mariecurie.org.uk/get-involved or use the QR code.



* Calls are free from landlines and mobiles. Your call may be recorded for training and monitoring purposes.