

- Do not continue to lie/sit on skin that is redder or darker than usual.
- Protect your skin by washing every day, using warm water or skin cleansers.
- Avoid using heavily perfumed soap or talcum powder as these can soak up the skins' natural oils, leading to vulnerable dry areas of skin.
- If you suffer from incontinence, let your nursing team know as they can provide pads and barrier preparations to prevent soreness.

What to lookout for:

- Pain to bony areas
- Red patches on light skinned people
- Discoloured patches on dark skin
- Blisters or damage to the skin
- Patches of hot skin
- Swelling
- Patches of hard skin
- Patches of cool skin

Ask a carer or a member of the nursing team if you have any concerns.

What should I do if I develop a pressure ulcer?

Tell your doctor or nurse as soon as possible and follow the advice they give to you.

If you have any questions, you can contact your GP, practice nurse, community nurse or the Tissue Viability team.(Specialist Wound team).

Contact Numbers:

Community nurses

0300 123 7571 options 2, 2 and 1

Tissue Viability Team

0300 123 7571 options 2,1 and 7 or

Email:herts.tvn@nhs.net

patient advice and liaison service

hct.pals@nhs.net

Freephone: 0800 011 611

Local: 01707 388164

Hertfordshire Community NHS Trust

Unit 1a Howard Court
14 Tewin Road
Welwyn Garden City
Hertfordshire
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Web: www.hct.nhs.uk

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Prevention of Pressure Ulcers

Information for patients



Pressure ulcers are more likely to happen when you have reduced mobility and are sitting or lying for long periods of time.

This leaflet gives advice on how to help prevent pressure ulcers.

Pressure ulcers, sometimes known as pressure sores or bed sores are an area of damage to the skin and underlying tissue.

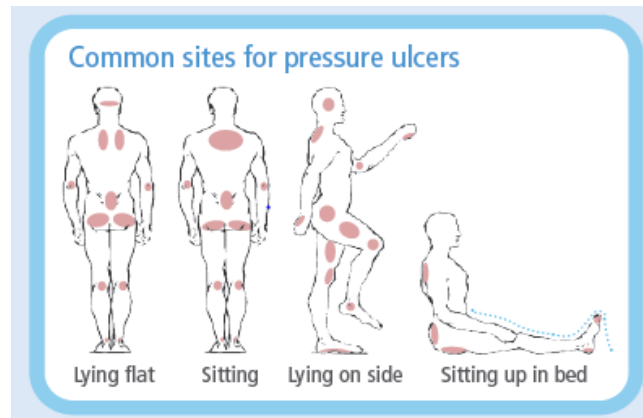
What causes pressure ulcers?

Pressure from sitting or lying for long periods or rubbing or dragging your skin across a surface, or pressure from a medical device.

Where is a pressure ulcer most likely to appear?

They are most likely to develop on the bony parts of the body which take your weight and where the bone is close to the surface eg the bottom and heels. They can develop in only a few hours and usually start with the skin becoming slightly redder, warmer or darker than normal. This can be less obvious with people who have dark skin.

This can go on to become a blister or an open wound. Sometimes these wounds can be very deep, going to bone.



Who is most at risk of developing pressure ulcers?

- You have to stay in bed
- You spend long periods sitting still in a chair
- You have difficulty moving and are unable to change position
- You are elderly or weak
- You have a serious illness
- You have poor circulation
- You cannot feel pain over part or all of the body, for example because you are diabetic or have had a stroke
- You are underweight and are not eating or drinking well
- You have a medical device eg oxygen tubing, neck and leg braces.
- You have had a pressure ulcer in the past
- You are incontinent. Note this can put you at risk of developing moisture lesions which are different to pressure ulcers.

What can I expect from my healthcare professional?

- An assessment within six hours of admission if you are in a community hospital bed or on the first visit by a community nurse to your home. This may include:
- Skin inspection and advice on repositioning.
- The nursing team will assist you or arrange for you to have regular repositioning and advise you on how often you should change position.

- Pressure relieving cushions/mattresses.
- Regular re-assessment of your skin and any changes in general health.
- Advice on a well-balanced diet and fluid intake and how to fortify food if you are underweight or have an ulcer already.
- Advice on skin protection to help prevent your skin from becoming sore.

What can I do to help myself?

- Change your position regularly
- Eat a well-balanced diet eg. fish/meat or alternative protein products, fruit and vegetables and carbohydrates such as potatoes and bread and try to drink plenty of fluids.
- If you are immobile but sitting in a chair, try to lift your weight from side to side to relieve the pressure to your bottom.
- If sitting ensure your feet are resting flat on the floor or if elevated on a stool or in a recliner then ensure the heels are hanging freely and have no contact with the surface.
- If you are mobile, get up and walk around as often as you are able or at least every two hours.
- If you are able to, have a carer or family member check for signs of damage at least once a day.
- A mirror may help you to look at skin in areas you cannot easily see.