

## Did you know that:

- Pressure sores are often known as bedsores or pressure ulcers.
- Pressure sores are areas of damaged skin and tissue that develop when constant pressure on a part of the body shuts down the blood vessels feeding that area of skin.
- Pressure sores usually occur when someone sits or lies in one position for too long
- Pressure sores usually develop below the waist and especially at the base of the spine, the buttocks and the heels. However many other parts of the body can develop pressure sores – including knees, heels, ankles and shoulders and the back of the head

It is estimated that as many as 1 in 5 patients in UK hospitals suffer from pressure sores but it is not just hospital patients who are at risk. Anybody who sits or lies down for prolonged periods of time is increasing their risk of developing pressure sores. Your Turn is designed to help people understand the causes of pressure sores and, therefore, hopefully prevent them in the first place.

There is a website designed to help answer some of the questions you might have about pressure sores, whether you are at risk yourself or if you know of somebody who might be at risk. [www.your-turn.org.uk](http://www.your-turn.org.uk) is a useful resource that could prove invaluable.

**For specific questions about your personal circumstances please seek advice from your healthcare professional.**

Campaign supported by:



**Q - What are the symptoms of a pressure sore?**

**A** – A pressure sore may initially appear as a red area of skin that does not disappear after a few hours and it may feel tender. The area may become painful and purple in colour. Continued pressure and poor circulation can cause the skin and tissue to break down.

**Q - Who is affected?**

**A** – Pressure sores can affect people of any age, particularly those with poor mobility who spend prolonged periods in bed or in a chair or are unable to change their position. Older people are more likely to develop pressure sores and the risk of developing them may be increased by factors such as diet, anaemia, recurrent infection, systemic diseases, poor circulation, incontinence and dehydration.

**Q - How do you treat pressure sores?**

**A** – Treating a pressure sore is much more difficult than preventing one. Treatment of pressure sores includes relieving pressure and keeping the sore clean. Dressings are used to encourage healing and antibiotic therapy can treat infection.

**Q - Can pressure sores be prevented?**

**A** – In many cases, yes. The most important factor in preventing sores is avoiding prolonged pressure on an area of the skin. This can be achieved by encouraging a person to change their position regularly throughout the day.

Those unable to do this themselves should be moved at appropriate intervals – at least every two hours for those lying down and every hour for those sitting upright.

Special mattresses, such as air filled alternating pressure mattresses, specialist foam mattresses and cushions that redistribute pressure help reduce pressure on sensitive areas.

Regular inspection of high risk pressure areas is important to detect early signs and prompt medical care should be provided.

It is also important to keep skin healthy, clean and dry. Use a mild soap and warm (not hot) water. Apply moisturisers so the skin doesn't get too dry. If you must spend a lot of time in bed or in a wheelchair, check the whole body every day for colour changes or other signs of sores.

**Q - Can diet prevent pressure sores?**

**A** – A healthy diet that includes plenty of vitamin C and zinc is important to maintain healthy skin and may help prevent pressure sores developing.

**For further information on the prevention of pressure sores visit [www.your-turn.org.uk](http://www.your-turn.org.uk)**