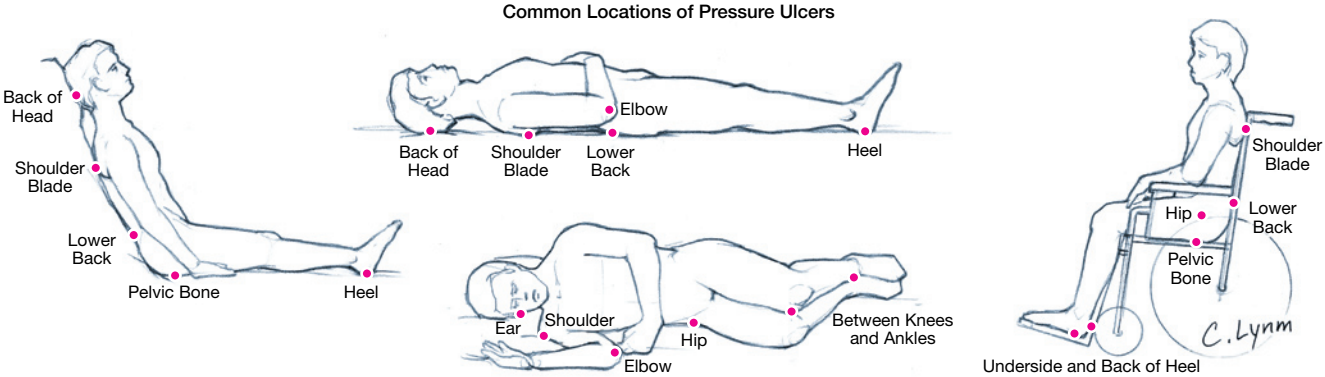
Pressure Ulcers

Pressure ulcers, also known as bed sores or pressure sores, often occur in persons who cannot move around easily. The skin and tissue underneath break down from continued pressure and poor circulation. When the skin breaks down, it becomes red. Open sores develop after the skin changes. In severe cases, the pressure ulcer causes destruction of muscle or even bone underneath the skin.

Pressure ulcers usually occur in persons who have predisposing risk factors, such as poor nutrition, continued moisture (especially from urine or feces), confinement to a bed or wheelchair, and other medical problems (especially spinal cord injury, hip fracture, or dementia). Because older people are more likely to need a wheelchair or to spend more time sitting in a chair or being confined to bed, they need special attention to prevent formation of a pressure ulcer. It is important for anyone with risk factors to discuss pressure ulcer formation with his or her doctor. Even mild skin redness may be the start of a pressure ulcer.

The January 8, 2003, issue of *JAMA* includes an article about pressure ulcers.

Common Locations of Pressure Ulcers



WHY DO PRESSURE ULCERS FORM?

Continued pressure on the skin from sitting or lying in one position causes poor circulation. Blood and lymphatic fluid have difficulty going to and leaving the pressurized area, causing both a lack of oxygen and swelling. In persons with poor nutrition or inability to move themselves, this lack of blood flow may cause the skin to break down. It becomes reddened and may tear away from the supporting tissue underneath. If the conditions leading to the pressure ulcer are not rapidly corrected, the skin damage may spread to the tissue, muscle, and even bone underneath. Pressure ulcers can become infected. This may make treatment more difficult.

PREVENTION AND TREATMENT OF PRESSURE ULCERS

- Keep skin free of moisture
- Improve nutrition
- Frequently turn or reposition someone who is confined to bed or to a wheelchair
- Air mattresses may be used for high-risk persons
- Correct or treat incontinence
- Special dressings may be used
- **Debridement** (cutting away dead tissue) or surgery may be required for severe pressure ulcers

Sources: American Academy of Family Physicians, National Institutes of Health, National Pressure Ulcer Advisory Panel

FOR MORE INFORMATION

- National Pressure Ulcer Advisory Panel
  703/464-4849
  www.npuap.org
- American Academy of Family Physicians
  http://familydoctor.org/handouts/039.html
- National Institutes of Health
  www.nih.gov/ninr/research/vol3/Skin.html

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