

Pressure Ulcers

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The development of pressure ulcers or sores is a significant risk for a large portion of the student population at Kauri Sue Hamilton. There are many factors that contribute to this risk, the most common being immobility, which is a problem faced by many of the students who are medically fragile. Pressure ulcers are a localized area of tissue destruction caused by a decrease in blood flow to that area. They frequently develop over bony prominences such as the heels, coccyx or tailbone, and hips. A few of the extrinsic factors that promote ulcer formation include moisture, friction, and shearing force. Other contributing factors are malnutrition, age, and low blood pressure.

So now we must ask ourselves what we can do to limit these factors and reduce the potential of ulcer formation. Many of the students as a result of their medical condition are not toilet trained so they are diapered. Frequent diaper checks, perhaps every hour or two, can have a significant impact on keeping the skin dry. There is a term used in the medical community called maceration to describe the process of skin degradation when the skin is moist. I believe all of us have seen a diaper rash that develops when the child remains in a soiled diaper for too long. Using barrier creams like Desitin will help protect the skin that has begun to break down. Friction and shearing force are closely related and can easily be eliminated through the use of proper lifting technique. When moving a child he or she must be lifted so there is no dragging or pulling of the skin that can lead to skin tearing. This also reduces the friction on skin as clothing does not rub against the skin.

The neurological impairment associated with many of the medical diagnoses of these students places them at greater risk for malnutrition related to their reduced or absent ability to eat solid foods. Many of these children must be tube fed. Individuals who are nutritionally depleted often have fragile capillaries, the small vessels that supply blood to the tissues, and they break reducing blood flow to these areas. In addition, malnourishment can result in weight loss and reduced immune function. Immobility and inadequate nutrition can lead to losses in fat and muscle mass, which serve as padding between the bones and skin leading to increased risk of pressure ulcers. As caregivers to these children we need to ensure that appropriate steps are being taken to reduce the risk of ulcer development. The key points here are early detection, so caregivers must visually inspect problem areas regularly and prevention through the techniques discussed above. Once an ulcer develops the healing process is slow and difficult, especially in the immobilized individual.