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Pressure ulcers

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Pressure ulcers, also known as pressures sores or bedsores are injuries to the skin and underlying tissue. They are caused by prolonged pressure on the skin.

They can happen to anyone, but usually affect people who have to stay in bed or who sit for long periods of time.

Symptoms of pressure ulcers

Pressure ulcers can affect any part of the body. They're most common on bony parts of the body, such as the heels, elbows, hips and base of the spine.

They often develop slowly but can form in a few hours.

Early symptoms

Early symptoms include:

- part of the skin becoming discoloured people with pale skin get red patches, while people with dark skin get purple or blue patches
- discoloured patches not turning white when pressed
- a patch of skin that feels warm, spongy or hard
- · pain or itchiness in the affected area

A pressure ulcer at this stage is called a category 1 pressure ulcer.

Later symptoms

The skin may not be broken at first, but if the pressure ulcer gets worse, it can form:

- an open wound or blister
- a deep wound that reaches the deeper layers of the skin
- a very deep wound that may reach the muscle and bone

When to get medical advice

Tell those caring for you if you develop symptoms of a pressure ulcer. It'll get worse if nothing is done about it.

Talk to your GP if you think you or the person you're caring for might have a pressure ulcer.

Get medical advice immediately if there is:

- red, swollen skin
- pus coming from the pressure ulcer or wound
- · cold skin and a fast heartbeat
- · severe or worsening pain
- · a high temperature

These symptoms could be a sign of a serious infection.

Treatments for pressure ulcers

Treatments for pressure ulcers depend on how severe they are.

In most cases, they just need basic nursing care. In severe cases, they can lead to life-threatening complications, such as blood poisoning.

Treatments for pressure ulcers include:

- applying dressings that speed up the healing process and may help to relieve pressure
- moving and regularly changing your position
- using foam mattresses or cushions, or dynamic mattresses and cushions that have a pump providing a constant flow of air
- eating a <u>healthy</u>, <u>balanced diet</u>
- debridement a procedure to clean the wound and remove damaged tissue

Surgery to remove damaged tissue and close the wound is sometimes used in serious cases.

Treatments for pressure ulcers

Those most at risk of getting pressure ulcers

Anyone can get a pressure ulcer, but you are more at risk if you:

- are over 70
- have to stay in bed after surgery or because of illness
- are unable to move some or all of your body (paralysis)
- are obese
- have urinary incontinence and bowel incontinence
- have a poor diet

have a medical condition that affects blood supply or makes your skin more fragile

Preventing pressure ulcers

It can be difficult to prevent pressure ulcers but you can reduce the risk by:

- regularly changing your position
- · checking your skin every day for early signs and symptoms of pressure ulcers
- · keeping well hydrated
- keeping skin clean and well moisturised
- · having a healthy, balanced diet with enough protein and a variety of vitamins and minerals
- <u>stopping smoking</u> smoking makes you more likely to get pressure ulcers because of the damage caused to blood circulation

If you're in a hospital or a care home, your healthcare team will be aware of the risk of developing pressure ulcers.

Ask your GP what you need to do if:

- you're recovering from illness or surgery at home
- you're caring for someone in a wheelchair or someone who has to stay in bed

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