

Preventing Skin Breakdown

THE FACTS ABOUT SKIN BREAKDOWN:

Your daughter falls off her bike and scrapes her knees. It is clear that the skin is damaged because it is open and oozing. Your husband cuts his finger while preparing your dinner. Again, it is clear that the skin is damaged. It is easy to tell when the skin is broken. There is an open area and there may be bleeding. It is much harder to tell when the skin is breaking down gradually.

CONDITIONS THAT INCREASE THE RISK OF SKIN BREAKDOWN:

Immobility: People who are confined to bed or chair tend to have more pressure on certain areas of the body. The pressure decreases the blood supply and over time may cause the skin to break down. This is particularly a problem with patients who are paralyzed or other people who cannot move themselves about in bed.

Improper technique in moving: When a person slides or is dragged on a surface, it causes shearing which can damage the skin and lead to breakdown.

Incontinence: Urine and feces are irritating to the skin. In addition, both of them cause moisture which adds to the irritation and can lead to skin breakdown.

Age: Loss of skin tone, natural oils, and elasticity is a normal part of the aging process. There also tends to be a decrease in circulation to the skin. The result is that the skin of the elderly is thinner and more likely to break down.

Poor nutrition: Good nutrition is very important to healthy skin. Patients who do not eat a healthy diet are at greater risk of skin breakdown.

Poor hygiene: Poor skin care makes the skin unhealthy. Body secretions, waste products, and dirt accumulate and can cause irritation, increasing the risk of breakdown.

Illness: Any illness that causes swelling causes some damage to the skin and increases the risk of skin breakdown. Some of these include heart disease, liver or kidney disease, and diseases affecting the blood vessels. Other illnesses and diseases of the skin itself may also increase the risk of breakdown. Any illness that causes a rash will increase the risk of breakdown.

Treatments and drugs: Some special treatments cause damage to the skin. Radiation therapy destroys cells in the treatment of cancer. Many times, the cells of the skin are damaged and this will lead to increased risk of breakdown. Many chemotherapy drugs used to treat cancer may cause skin problems and lead to skin breakdown.

Obesity: People who are very overweight are at higher risk of skin breakdown because there are more areas where the skin rubs against other skin. The rubbing causes irritation as well as moisture. This is especially a problem between the thighs, between the folds of the buttocks, under the breasts, and behind the knees.

COMMON AREAS MORE LIKELY TO DEVELOP SKIN BREAKDOWN:

Whenever a patient is in bed and not moving for a period of time, there are certain areas of the body that have more pressure on them. These areas are especially at risk for skin breakdown.

Lying on your back: When a person is lying on his or her back, the most pressure is on the heels, sacrum, elbows, shoulder blades, and the back of the head.

Lying on your side: When a person is lying on his or her side, the most pressure is on the ankles, side of the knees, hips, shoulders, ears, and side of the head.

Preventing Skin Breakdown

Lying on your abdomen: When a person is lying on his or her abdomen, the most pressure is on the toes, knees, genitals (for males), breasts (for women), and the top of the arm where the breast bone meets the upper arm.

Sitting up in bed: Sitting either propped up or with the head of the bed raised causes more pressure on the sacrum, the tail bone, the heels, and sometimes the elbows.

Sitting up in a chair: Whenever a patient spends a lot of time in a chair, there are also areas that have more pressure on them. Those areas include the back of the shoulders, elbows, the tail bone, the hips, behind the knees, and the bottom of the feet. If the chair has leg rests, like a wheelchair's, the leg rests can cause pressure on the back of the legs at the calf.

WAYS TO REDUCE PRESSURE AND SKIN BREAKDOWN:

Providing good skin care: Your basic education as a home health aide taught you how to perform good skin care. This can be one of the best things you can do to reduce skin breakdown.

Turning and positioning: When positioning the patient, the goal is to protect the areas that receive the most pressure.

For the patient lying on his or her back, place a pillow under the head, use a pillow or folded blanket to support the arms and hands, and sometimes small folded towels under the small of the back and under the ankles. (Check with your supervisor about the towels under the back and ankles.)

For the patient lying on his or her side, place a small pillow under the head, making sure the ear lobe is not bent. Carefully position the bottom arm so it isn't under the body. Support the top arm with a small pillow. Support the top leg with a small pillow as well.

For the patient who is lying on his or her abdomen, place a small pillow under the head, positioning the head so the ear lobe is not bent. Place a small pillow under the lower legs to keep pressure off the toes.

For patients who are confined to chairs, change position at least every hour. Encourage the patient to "shift" his weight frequently if he is able to do so.

Each time you turn the patient, check the skin carefully for areas of redness and provide good skin care. Always make certain there are no wrinkles in the sheets.

Protective pads: Special sheepskin or foam pads are often used on the bottom sheet to protect the patient's skin.

Special mattresses: Many patients who are at great risk of skin breakdown may use special mattresses. If your patient does, make certain that you know how it works and what precautions to take.

Heel and elbow protectors: Protectors for the heels and elbows are made to fit the shape of the heel or elbow. Not only do they help relieve pressure, they also reduce friction when the patient moves.

Special cushions: The patient who spends a lot of time sitting should have a special foam, gel, or air cushion. If your patient uses one, make certain that you learn about it so that you do not damage it and that you use it properly.

Range of motion exercises: Range of motion exercises not only reduce joint stiffness and contractures, they also contribute to better circulation. Better circulation helps reduce skin breakdown.

Preventing Skin Breakdown

RECOGNIZING EARLY SIGNS OF SKIN BREAKDOWN:

It is easy to recognize broken skin. It is more difficult to recognize the early signs of skin breakdown before the skin is actually broken. The damage to the skin caused by pressure may begin with signs you can see long before the skin is actually broken. Here are some tips for identifying early skin breakdown:

- » Skin breakdown is often due to unrelieved pressure, especially over bony prominences. Check these areas often.
- » Reddened areas are commonly seen over bony areas the patient has been lying or sitting on. This redness may be normal. Two important signs can tell you what normal reddened areas are like.
 - The redness does not remain for a long period of time.
 - When you gently press the reddened area, it will briefly leave a “white” area where your finger was placed. (This is known as “blanching.”) Then the color quickly returns.
- » Reddened areas that are likely to be abnormal and early signs of breakdown are different.
 - The area is continuously reddened in light-skinned patients. In patients with darker skin tones, the areas may have blue or purple discoloration.
 - There may be a change in the skin temperature of the area, either warmth or coolness.
 - The skin over and around the area may feel firm or “boggy.”
 - The patient may feel pain or itching.
- » If the abnormal areas are not treated at this point, the damage to the skin will continue to increase and the patient will develop an open ulcer. The underlying damage to the skin can be very serious before the skin actually breaks open and once it does, the ulcer may be deep and very difficult to heal.

REMEMBER THESE IMPORTANT POINTS:

1. Learn the conditions that can increase the risk of skin breakdown.
2. Follow the good skin care techniques you have been taught.
3. Report to the supervisor if you find the patient wet on a frequent basis. Foley catheters should not leak, so if you have a patient with a leaking catheter, inform the supervisor.
4. Learn how to use properly all preventive devices the patient may have. For example, if the patient is on a special mattress, do not adjust the firmness. Notify the supervisor if you believe the family or others have changed the settings. Do not put a lot of padding under the patient if he or she is on a special mattress. Doing so may reduce the effect of the special mattress.
5. Report to the supervisor if the patient is not compliant in using special equipment.
6. Carefully check the skin for early signs of damage due to pressure and report any findings of abnormal skin.
7. Report to the supervisor if the patient refuses to turn or reposition.
8. NEVER massage or apply heat or cold to a reddened area unless you have been specifically assigned to do so. These actions may increase damage to the skin.
9. Document all findings on the report sheet. Note anything you reported and to whom you made the report.

Preventing Skin Breakdown

CASE STUDY: IDENTIFYING THE RISK FOR SKIN BREAKDOWN

Carole is a home health aide who is caring for Mr. Juarez, an eighty-six year old man who has right-sided paralysis from a recent stroke. At the present time he is confined to bed and chair. Mr. Juarez is a picky eater and doesn't like to eat many fruits and vegetables. He is incontinent and wears diapers. Mr. Juarez also has congestive heart failure and often has swelling in his legs. He uses a hospital bed and always wants to have the head raised when he is awake and doesn't want to lie on his side. Therefore he spends all day either in a chair or in the bed with the head raised.

While giving a bath to Mr. Juarez, Carole notices that there is a reddened area on his sacral area. It is about the size of a quarter. It is warmer and feels firmer than the surrounding skin. She gently presses the area and it stays the same color. Mr. Juarez says it hurts when she washes the skin there.

Carole also notices another reddened area on Mr. Juarez's right shoulder. It does not feel different from the surrounding skin. When she gently presses the area, it produces a white area that quickly returns to the red color. When she has completed the bath, she notices that the reddened area is not there anymore.

SOMETHING TO THINK ABOUT:

- » Do you believe that Mr. Juarez is at risk for skin breakdown? Why or why not?
- » Do you believe the redness in the shoulder is normal? Do you believe the redness in the sacral area is normal? Why or why not?
- » What do you think Carole needs to report to the supervisor? What should she document in her visit note?

Preventing Skin Breakdown

DIRECTIONS: READ EACH QUESTION CAREFULLY. THEN, DETERMINE THE BEST ANSWER. CHECK THE CORRESPONDING BOX ON YOUR ANSWER SHEET. DO NOT WRITE ON THIS POST-TEST.

1. Which of the following is not a risk factor for developing skin breakdown?
 - a. Being 25 years of age
 - b. Being paralyzed
 - c. Having radiation treatments
 - d. Being very overweight

2. It is possible for skin damage to develop even when the skin is not broken.
 - a. True
 - b. False

3. When a person is lying on his or her side, which of the following areas are at greatest risk for pressure?
 - a. The sacral area and the heels
 - b. The elbows and tailbone
 - c. The hips and shoulders
 - d. The toes and back of the head

4. Supplies or devices to reduce pressure include which of the following?
 - a. Band-aids
 - b. Gel cushions
 - c. Chux
 - d. Corn starch

5. What is one clue that a reddened area is normal?
 - a. The skin around the area is very firm.
 - b. The skin around the area is boggy.
 - c. The redness does not turn white when you gently press it.
 - d. The redness does not remain for a long period of time.

6. When working with a special air mattress what should you always keep in mind?
 - a. The family will always know how to adjust it.
 - b. You should put a lot of padding under the patient when he is on the mattress.
 - c. You should learn how to use the mattress properly.
 - d. You should adjust the firmness of the mattress if the patient wants you to.

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Preventing Skin Breakdown

POST-TEST, PAGE 2

7. Which of the following are important measures you can take to prevent skin breakdown?
- Keep the patient clean and dry.
 - Turn and position the patient properly.
 - Properly use any special equipment the patient may have.
 - All of the above
8. Which of the following areas are prone to increased pressure when the patient is lying on her back, sitting up in a chair, or sitting with the head of the bed raised?
- The sacral area and elbows
 - The toes and bottom of the feet
 - The knees and genitals
 - The ears and breasts
9. Long periods of pressure do not often cause skin breakdown.
- True
 - False
10. Which of the following should you never do unless specifically assigned to do so?
- Apply an ice pack to a reddened area.
 - Gently press a reddened area to see if it turns white.
 - Touch the skin surrounding the reddened area to see if is firm or boggy.
 - Ask the patient if the reddened area is painful to touch.

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