



Partners in Care Meeting- #STOP the Pressure

Pressure Ulcers & Moisture Associated Skin Damage  
What am I looking at?

Tissue Viability Team- York & Scarborough NHS Foundation Trust  
November 2022

# What is a pressure ulcer and moisture associated skin damage?

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“A Pressure Ulcer is localised damage to the skin and/or underlying tissue, usually over a bony prominence ( or related to a medical or other device ) , resulting from sustained pressure ( including pressure associated with shear). The damage can be present as intact or as an open ulcer and may be painful”  
(NHS I,2018)



Moisture associated skin damage is inflammation and erosion of the skin caused by prolonged exposure to various sources of moisture”





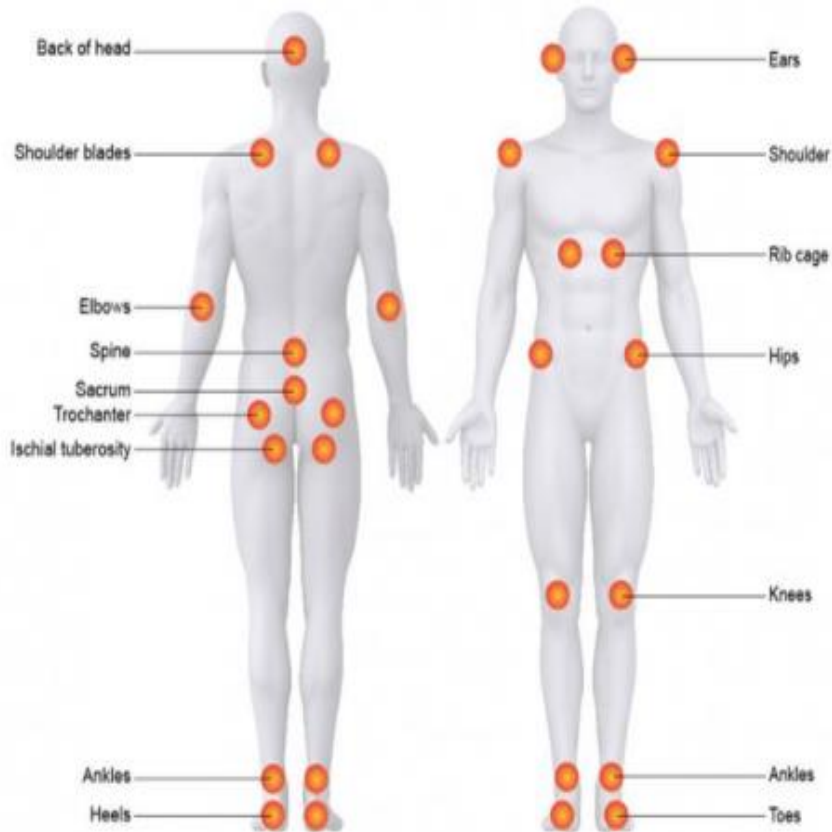
**What causes pressure damage?  
Poor Skin, Poor  
Mobility and individual  
issues.....**



# What to Look Out for ?

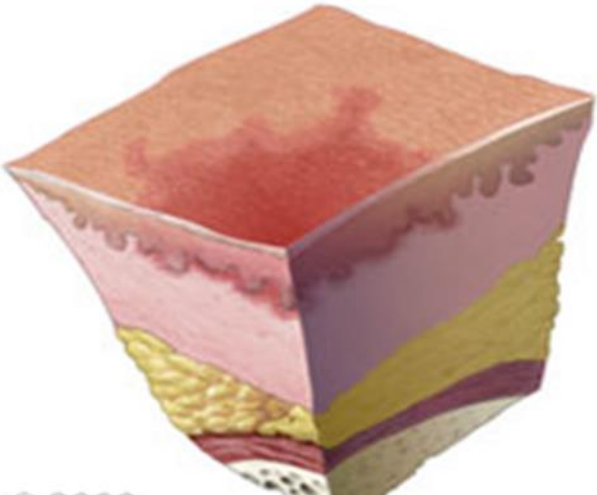


# Common Areas for Pressure damage

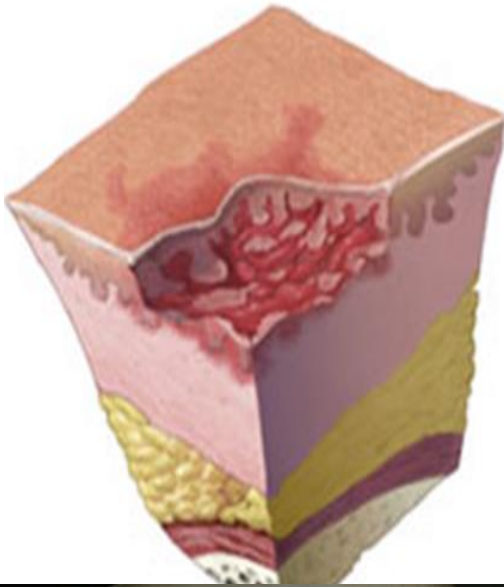


# Category 1

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# Category 2- Partial Thickness Skin Loss

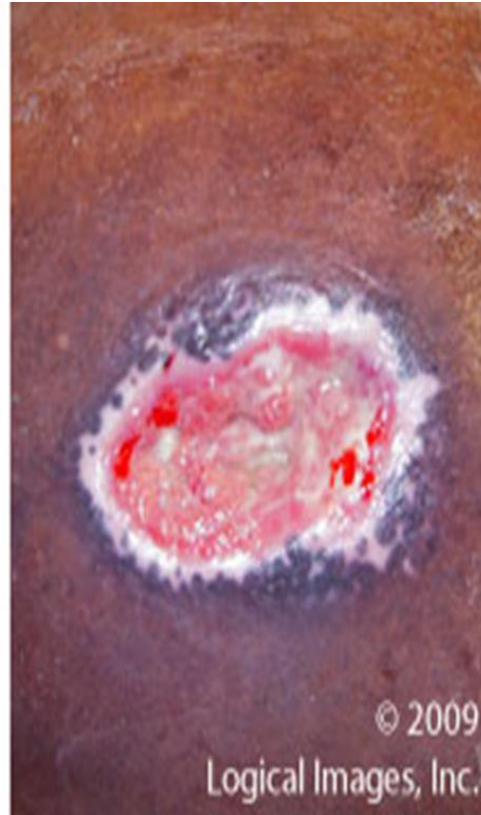


# Category 3-Full Thickness Skin Loss

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# Category 4

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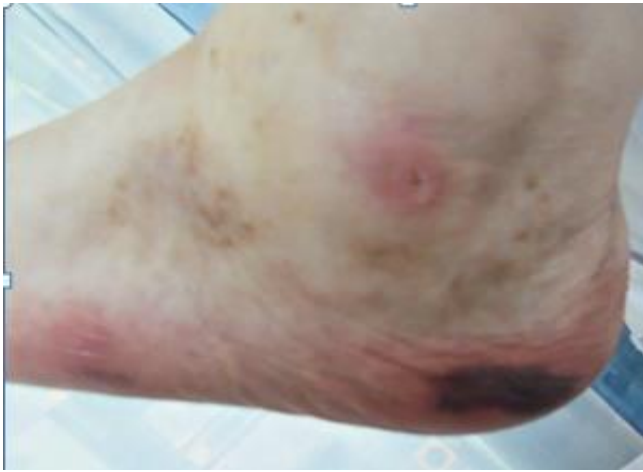
# Unstageable

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# Deep Tissue Injury

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# Device Related Pressure Ulcer



- ▶ *The damage caused by this urinary catheter could be categorised as a DTI (d)*



- ▶ *This infant has Category I damage to the cheeks and a small unstageable ulcer on the ear*

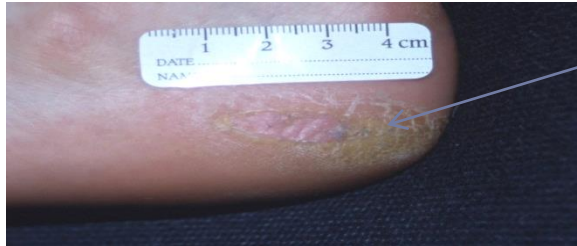


- ▶ *Damage has occurred where the spectacles and elastic from the oxygen mask press on the pinna of the ear*



# Types of Tissue in the base of the wound

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Epidermal



Granulating Tissue



Necrotic Tissue



Slough

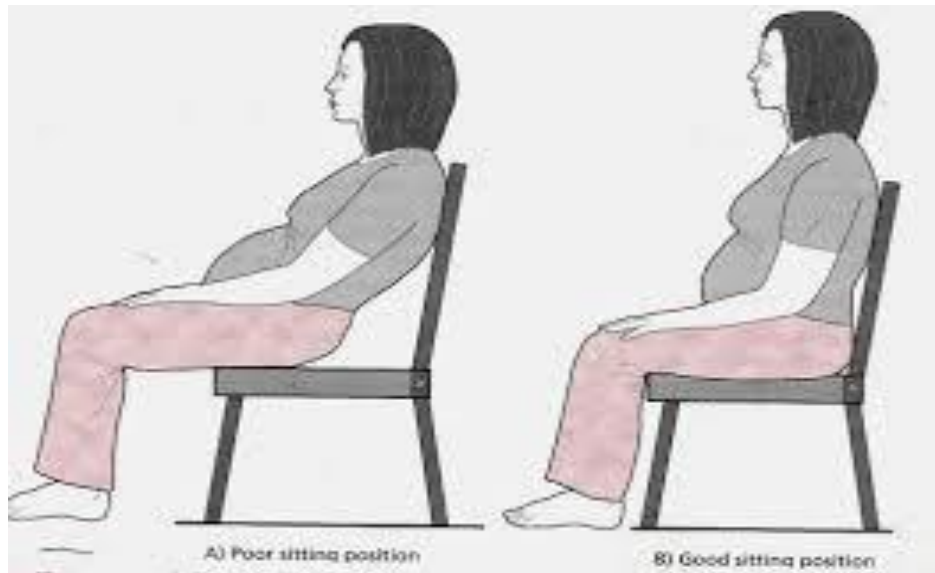


# 30 Degree Tilt



# Sitting position

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# HEEL S.O.S

## Strictly Off Surface

THE INCIDENCE OF HEEL PRESSURE ULCERATION IS INCREASING.  
HEELS MUST BE STRICTLY OFF SURFACE WHEN A PATIENT IS NOT MOBILISING.  
**IS YOUR PATIENT POSITIONED CORRECTLY?**



Float heels over pillows. Use two pillows if necessary



Float both heels and ankles when nursed on the side



Move up the bed using a slide sheet



Keep soles and toes away from the bed end



Softcasts on the correct way round



Heels off the stool



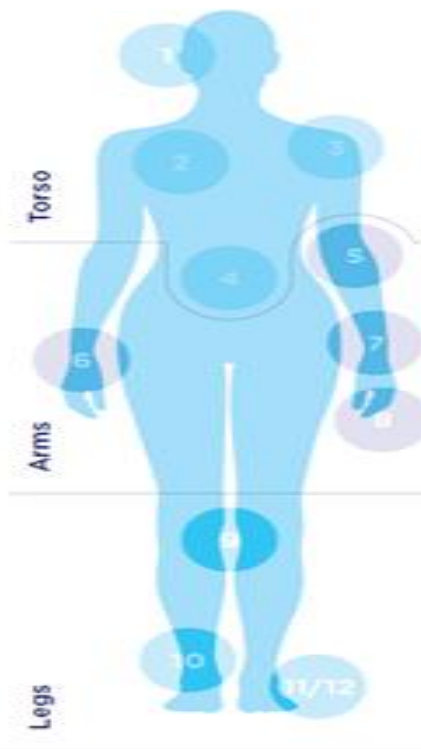
Feet flat on the ground















# Kerrapro (from the Specialist Dressing Cupboard)

## Protection through prevention

KerraPro™ helps protect at-risk patients from pressure damage to their skin



The infographic features a blue silhouette of a human body with 12 numbered circles indicating application points for Kerrapro. The body is divided into three horizontal sections: Torso (top), Arms (middle), and Legs (bottom). The Torso section includes points 1 (head/face), 2 (shoulders), 3 (sacrum), 4 (lower back), 5 (elbows), and 6 (wrists/hands). The Arms section includes points 7 (wrist) and 8 (fingers/toes/hands/feet/ankles). The Legs section includes points 9 (knees/ankles), 10 (ankles), 11 (back of heel), and 12 (underside of foot).

	<b>1</b> Strip provides protection when using face masks or other healthcare equipment.		<b>2</b> Sheet cushions the head or shoulder blades and can be used flat or folded.
	<b>3</b> Sacrum relieves pressure on the shoulder and other bony prominences.		<b>4</b> Sacrum is perfectly shaped to reduce pressure in the sacral area.
	<b>5</b> Heel can be used in different locations, including on the elbows and knees.		<b>6</b> Sheet can be cut to size and provides protection to wrists and hands.
	<b>7</b> Versatile and flexible, wrap Strip around the wrist.		<b>8</b> Cut Strip to size to protect at-risk areas, including fingers, toes, hands, feet and ankles.
	<b>9</b> Sheet reduces pressure between knees or ankles.		<b>10</b> Sacrum can also reduce pressure on the ankles.
	<b>11</b> Heel can protect the back of the heel on patients lying down.		<b>12</b> Heel can also protect underneath the foot on patients sitting up or walking.

# What is 'Moisture Associated Skin Damage' (MASD)?

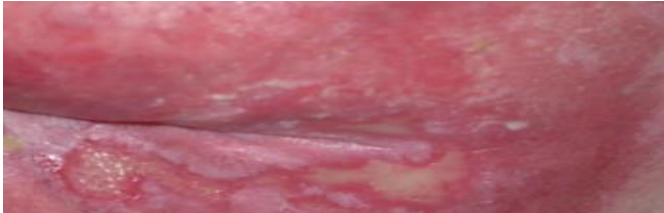
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“Inflammation and erosion of the skin caused by prolonged exposure to various sources of moisture”

- ▶ Urine
- ▶ Faeces
- ▶ Wound exudate
- ▶ Perspiration
- ▶ Stoma effluent



# Moisture Associated Skin Damage- (Not caused by pressure)



- ▶ *These multiple superficial lesions with diverse edges are typical of Incontinence Associated Dermatitis*



- ▶ *Wounds related to IAD such as these are often extremely painful*



- ▶ *This wound demonstrates how the epidermis can easily be stripped away by incontinence*



# Effects of moisture on the skin...

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- ▶ Over-hydration causes swelling and maceration
- ▶ Increases permeability to skin
- ▶ Increases risk of friction and therefore pressure ulcers developing
- ▶ Urea converted to ammonia which causes skin pH to become more alkaline which allows microbes to thrive



# Moisture or Pressure?

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## Moisture

Can occur anywhere exposed to moisture

Irregular shape, undefined edges

Superficial, partial thickness skin loss



Presence of necrosis or slough indicates combination ulcer

## Pressure

Usually over bony prominence

Often more circular with defined edges

Vary in depth depending on degree of damage

Tissue can be necrotic, sloughy, granular or epithelial



Both need reporting on DATIX!



If combination ulcer report as pressure

# Treatment

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## MILD

**Note: Barrier cream only indicated for incontinence-associated dermatitis**



- Apply every third wash or twice daily.
- Pea-sized amount will cover an area size of your hand.

## MODERATE MASD



- Apply once a day
- No need to re-apply after every cleanse

## SEVERE MASD



- Use foam spray & cleanser – pat dry & apply ointment at every cleanse or wash.





## Are you aSSKINg the right questions about Great Skin and Pressure Ulcer Prevention?



assess risk

Skin assessment and care

Surface selection and use

Keep moving

Incontinence and increased moisture

Nutrition and hydration

give information

**#Stopthepressure**

**#aSSKINg**

**#LoveGreatSkin**

# Any questions?

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