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**Skin Protection**

**Immobility** is the number one cause of **bedsores** (also called pressure ulcers). People who stay in bed for long periods or are in a wheelchair are at the greatest risk.

**Bed sores can also be caused when the skin is weakened by**:

• **Friction**. Friction is caused when skin is rubbed against or dragged over a surface.

Even slight rubbing or friction on the skin may cause a bed sore - especially for people with weak skin.

• **Dryness** and **cracking**.

• **Age**.

• **Irritation** by urine or feces.

• Lack of good **nutrition** or drinking enough fluids.

• Certain **chronic conditions** or diseases - especially those that limit circulation. Bed sores are a serious problem and, in most cases, can be prevented by following the steps listed below.

 • A bed bound person should change position every two hours.

 • A wheelchair bound person should shift her weight (or be helped to) in the chair every fifteen minutes for fifteen seconds and change position every hour.

 • Use mild soap and warm (not hot) water. Rinse and dry well – pat, don’t rub.

 • Gently clean off urine or feces immediately with mild soap and warm (not hot) water.

 • If incontinence is an issue, avoid using “blue pads” or disposable waterproof underpads that hold moisture on the skin. A waterproof cloth pad that can be laundered and reused is a good alternative.

Look at the care receiver’s skin at least once a day. Pay special attention to pressure points.

**What to look for**

What a bed sore looks like depends on how severe it is. The first signs of a bed sore include:

• Redness on unbroken skin lasting 15-30 minutes or more in people with light skin tones. For people with darker skin tones, the ulcer may appear red, blue, or purple. If in doubt, compare the area to the other side of the person’s body.

• Any open area - it may be as thin as a dime and no wider than a Q-tip.

• An abrasion/scrape, blister, or shallow crater.

• Texture changes - the skin feels “mushy” rather than firm to the touch.

• A gray or black scab. Beneath the scab may be a bed sore. Do not remove the scab. If a bed sore is beneath it, this could cause damage or lead to infection.

Material adapted from:  *Family Caregiver Handbook Washington State Department of Social and Health Services Aging and Disability Services Administration*