

# SKIN CARE & WOUND PREVENTION

Refer to chapter 2 in your  
SCI reference manual

## WHY SHOULD YOU CARE?

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1. It is estimated that up to 50% of all people with a SCI will get a pressure sore.
  2. Pressure sores can seriously delay your rehab and severely restrict your activities.
  3. Pressure wounds can be prevented!
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**Learning to prevent pressure wounds and learning how to manage a pressure wound are two of the most important things you can learn in rehab**

## **OBJECTIVES OF TODAY'S SESSION:**

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To understand:

- why your skin is at risk of developing wounds.
  - the common causes of wounds.
  - why it is important to recognize and manage red spots.
  - how you can prevent wounds.
  - what you can do if you get a wound.
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## WHAT DOES SKIN DO?

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1. It protects you.
  2. It provides sensory information.
  3. It helps to regulate body fluids and temperature.
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## 3 MAIN CAUSES OF WOUNDS

### 1. Pressure

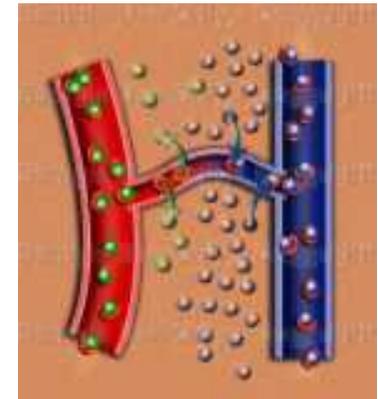
Excess outside pressure, preventing blood flow to skin.

### 2. Shear

Two layers of tissue next to each other are pulled in opposite directions.

### 3. Friction

constant rubbing or pulling of skin across surfaces.



## 5 MAIN RISK FACTORS

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1. **Sensory Loss**
  2. **Reduced Mobility**
  3. **Reduced Activity**
  4. **Moisture**
  5. **Poor Nutrition**
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## Some other risk factors

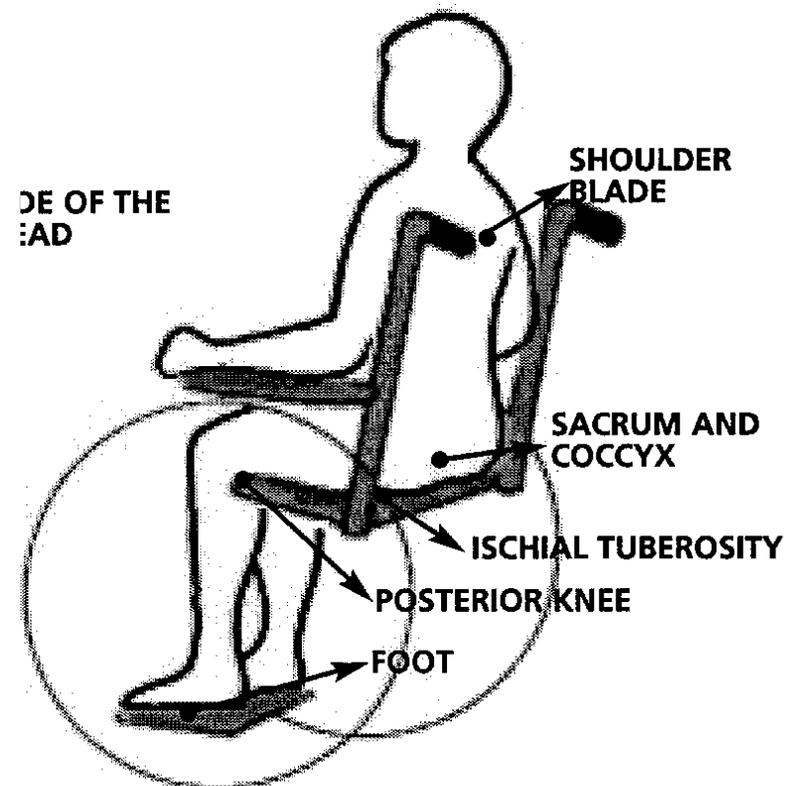
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- There are other factors that increase risk of pressure wounds.
    - Age
    - Diabetes
    - Smoking
    - Etc.
  - Don't be surprised if your team talks to you about other factors which may increase your risk of pressure wounds.
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# Areas of Highest Risk when Sitting

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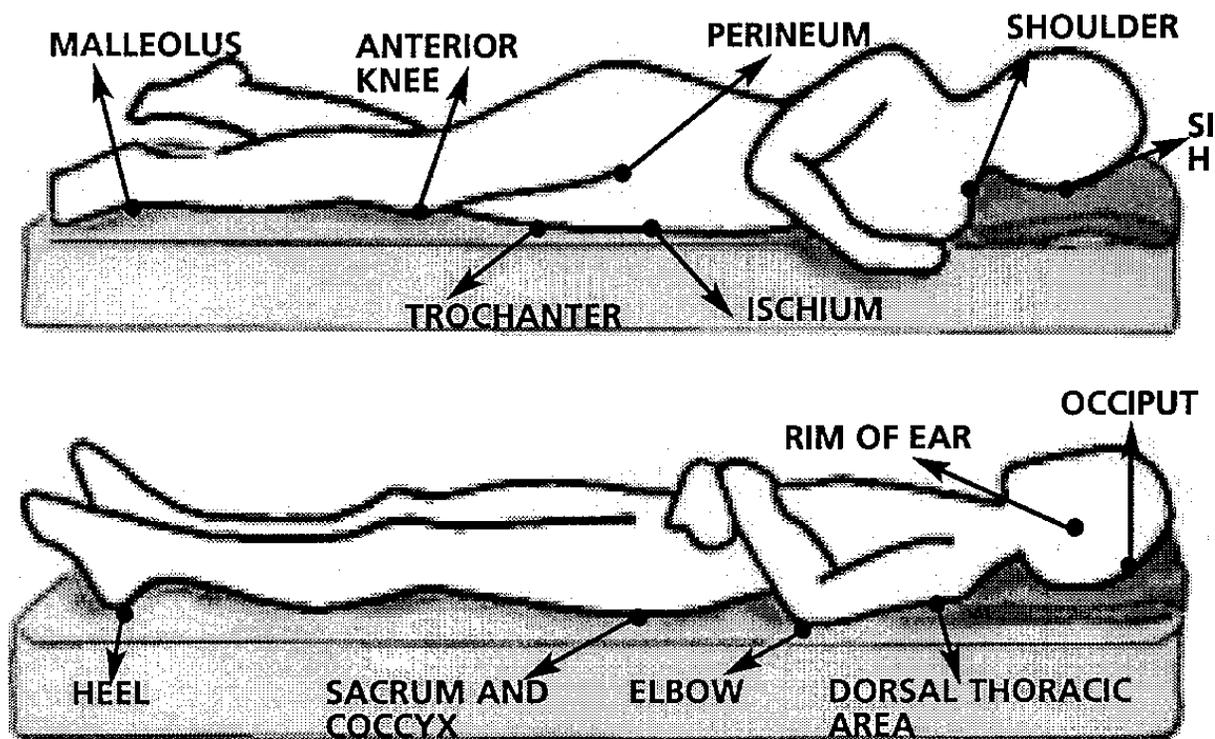


# Areas of Highest Risk when Lying

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# Areas of Highest Risk when Lying

Figure 1: Pressure Points



## PREVENTING WOUNDS

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- Skin Checks
  - Weight Shifts – 30 secs every 15 mins
  - Watch Your Position
  - Off Load Heels
  - Consider Your Equipment and Clothes
  - Introduce New Activities Gradually
  - Careful and Controlled Transfers
  - Keep Skin Clean and Dry
  - Eat and Drink Well
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# DETECTING AND DESCRIBING WOUNDS

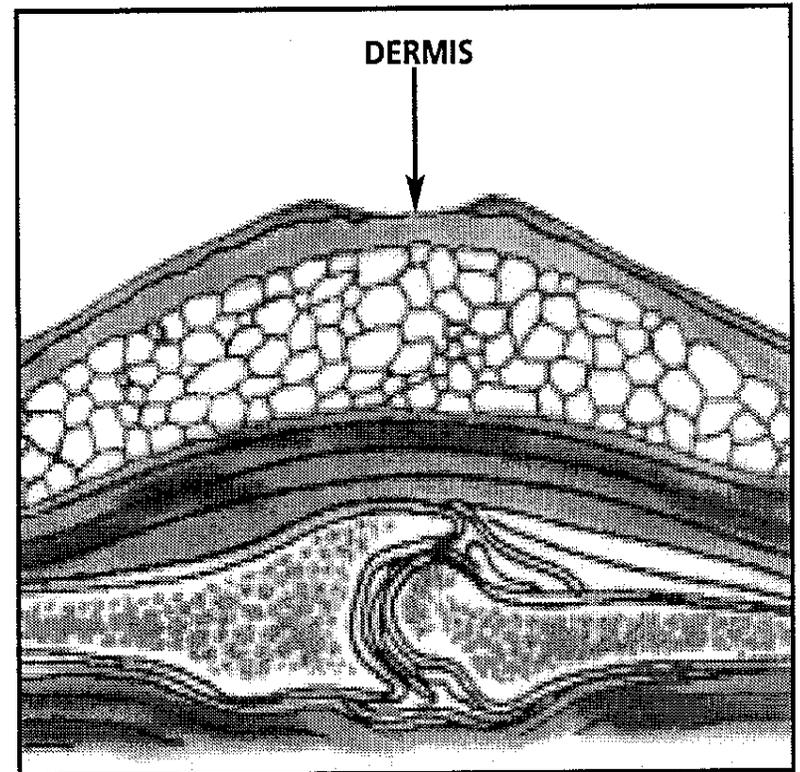
- LOCATION
- SIZE
- STAGE
  - Four stages of Pressure wounds
    - STAGE I
    - STAGE II
    - STAGE III
    - STAGE IV

## STAGE I

- Redness that does not go away after removing the cause of pressure.
- We call this non-blanchable **RED SPOT**
- Usually the RED SPOT does not go away within 15 mins.



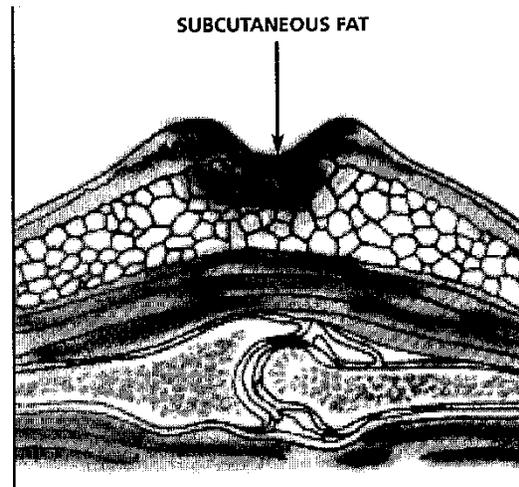
# STAGE I



Stage I:

## STAGE II

- Open Wound
- Superficial – Only the top layer or two are open.
- Shallow crater, blister, abrasion,

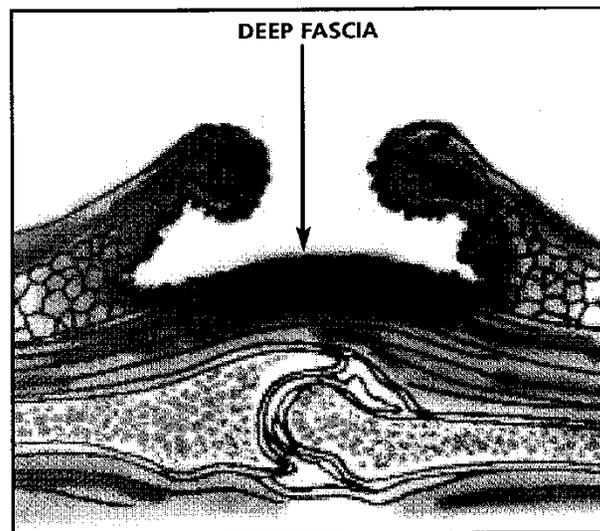


Stage II:



## STAGE III

- Damage is deeper – down to the fatty tissue.
- No tendons, muscle or bone seen

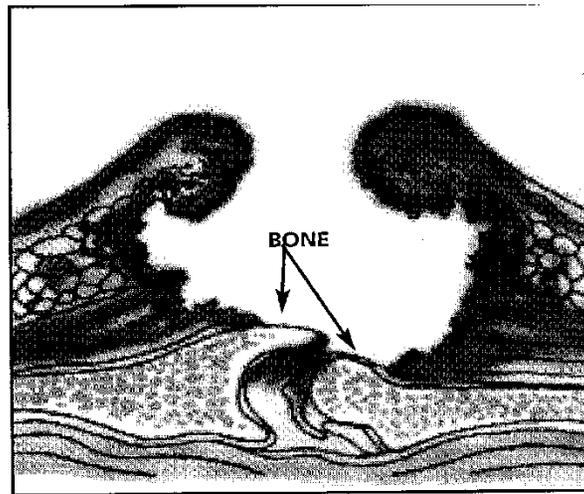


Stage III:



## STAGE IV

- Deep Wound
- Down to the point that muscle and/or bone visible or damaged.



Stage IV:



## STOPPING A WOUND EARLY!

- **RED MEANS STOP!**



- **Get off the red area right away.**
- **Inform your support team**
  - **OT, PT, RN, Care Providers, MD, Family**
- **Try and determine the cause**
- **Eliminate the cause**

## WOUND HEALING

- **How long does a wound take to heal?**

Answer: Depends on many factors:

- Which stage is the wound at: the more severe the wound the longer it takes to heal.
- hydration, nutrition & positioning/seating all key to wound healing



## KEY MESSAGES

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- The main causes of skin breakdown are...
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

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- The main causes of skin breakdown are...
  - Pressure
  - Shearing
  - Friction
- After SCI, sensation to the skin is altered or absent and mobility is often limited – This increases risk of developing pressure wounds.
- Wound Prevention is easier than Wound Healing.

## KEY MESSAGES

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- Red means **STOP!**
- The Cause must be determined and removed.

# **BCPA/Peer Perspective**

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## Case example

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- After completing a transfer back to bed you notice that your w/c cushion was in backwards – what steps should you take?

## Case example

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- After your attendant checks your skin they inform you that you have a red area on your coccyx/buttocks. What should you do?

# Questions?

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# The Skinny On Skin

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