

# Protecting pressure areas in the last days of life

End of Life Care

Information for Patients and Families

Produced: October 2024

Review: October 2027

Leaflet number: 1547 Version: 1

## What is a pressure ulcer?

A pressure ulcer is damage to the skin and the tissue underneath. Pressure ulcers are also known as bed sores or pressure sores. They most often form over bony parts of the body. This includes the heels, elbows, hips, spine and tailbone. Oxygen masks or tubing can also cause pressure ulcers on the ears or nose.

When a person is dying they are at high risk of developing pressure ulcers.

- The blood flow through their skin is reduced.
- Their body weight puts pressure on the same areas of skin because they move less.
- Sweating or incontinence causes moisture on the skin. This can make pressure ulcers more likely.

## Why is it important to manage pressure ulcers in the last days of life?

It can be difficult to stop pressure ulcers completely. Pressure ulcers can appear quickly. Sometimes it only takes a few hours. The damaged skin may become a blister or an open wound. They can become painful and the person need strong pain relief. Pressure ulcers may get infected or start to smell bad. They can eventually damage deeper layers of skin or muscle and bone.

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## What does a pressure ulcer look like?

- Discoloured patches of skin that do not change colour when pressed. (Red patch on white skin, purple or blue patch on black or brown skin)
- A patch of skin that feels warm, spongy or hard
- Pain or itchiness in the affected area of skin

## How can we help protect pressure areas in the last days of life?

The nurses make a plan based on the person's needs, choices and comfort. We normally recommend:

- A suitable pressure relieving mattress. Some people also find inflatable heel protectors helpful. If this is uncomfortable a different mattress can be used. However, this may not be as good at protecting the skin. This means that the risk of pressure ulcers is now higher.
- Changing position. Lying in one position without moving can make people feel stiff and uncomfortable. It also increases the risk of pressure ulcers or making pressure ulcers worse. Changing position eases pressure on the parts of the body that are at risk. We normally recommend changing position at least every 4 hours. This will depend on the person's needs and choices. Changing position does not need to be a full turn in the bed. A small movement to lean the patient to one side can be helpful.
- Sometimes a patient or their family will ask the nurses not to move them. They worry that moving will be painful or unsettling. Changing position is important to help protect the skin from pressure ulcers. The nurses can give pain relief before moving to help with this.
- Checking the skin 2 times a day. This helps nurses to notice signs of skin damage as quickly as possible. This can be done at the same time as the person is given a wash.
- Continence aids. When a person is dying, they may lose control of their bladder and bowels. It is important to keep the skin as clean and dry as possible. There are different ways to manage this depending on the person's needs and choices.

## Treating pressure ulcers

Sometimes creams or dressings can help manage pressure ulcers. Pain relief may be needed.

## What can family or friends do to help?

- Ask the nurses to show you how to use the bed controls to change position.
- Do not lift or try to move the person up or down the bed.
- Moving someone in the wrong way can cause damage to their skin. This can make a pressure ulcer more likely.
- Ask the nursing team for help with changing their position.
- Moisturising heels and elbows can help. Let the nurses know if you would like to do this.

## Space for notes

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