

## Bedsore

### Overview:

1. Bedsores are ulcers that develop in areas of the body due to prolonged pressure on the skin.
2. They are common in bedridden people who are immobile or unable to feel pain.
3. Main symptoms include unusual changes to skin color or texture.
4. The degree of damage to the skin and tissues varies and severe cases may involve muscles.
5. Bedsores can be prevented by regularly examining the skin, especially bony prominences.

### Introduction:

A bedsore is an ulcer in the outer layer of the skin (epidermis) and the underlying tissue (dermis) due to prolonged pressure. It can occur to anyone, but is most common in bedridden people or those who use wheelchairs for long periods. It often appears against a bony protrusion, in areas such as:

1. Hips.
2. Buttocks.
3. Back.
4. Tailbone (coccyx).
5. Ankles.
6. Heels.
7. Shoulders.
8. Back of the head.
9. Elbows.
10. Knees.

### Other Names:

Pressure ulcer.



### Cause:

Bedsore are caused by a lack of blood flow to the skin and tissues due to prolonged pressure. Blood flow is necessary to deliver oxygen and other nutrients to tissues, that without them, skin and surrounding tissues become damaged and may eventually die. The friction caused by the slow slide on bed or chair, especially if the skin is moist, also contributes to the condition.

### Risk Group:

The people at most risk of bedsore are those who have a medical condition that limits their ability to change their position or who spend most of their time in bed or on a wheelchair.

### Risk Factors:

1. Aging; due to thinner and less elastic skin.
2. Inability to easily change seating or sleeping position.
3. Loss of sensation (such as in spinal cord injuries and other conditions).
4. Health problems that affect blood flow (such as: sclerosis, diabetes and others).
5. Malnutrition and moisture; as nutrition helps keeping the skin healthy.
6. Obesity.
7. Urinary incontinence.

### Symptoms:

Symptoms depend on the stage of the bedsore, as follows:

- **First Stage:**

The area becomes red and warm compared to the surrounding skin parts. It may also be blue or purple. The patient may complain of itch, pain, and burning sensation.

- **Second Stage:**  
The affected area becomes damaged and develops fluid-filled blisters or pink or red open sores. The patient may also complain of pain as well as discoloration of the surrounding skin.
- **Third Stage:**  
The area gets the shape of a nozzle-like deep wound and the damage extends down the layers of the skin, including fat.
- **Fourth Stage:**  
The area becomes severely damaged and tissues largely eroded. Sores may reach muscles, tendons, bones and joints. At this stage, there is also a high risk of infection.

### When to see a doctor?

When the ulcers do not go away 24 to 48 hours after changing the position to relieve the pressure on the area.

When signs of infection appear, such as: fever, pus, unpleasant odor or increased surrounding redness.

### Complications:

1. Cellulitis (bacterial infection of the skin and connective tissues).
2. Infections of bones and joints.
3. Squamous cell carcinoma (Marjolin ulcer).
4. Sepsis.

### Diagnosis:

- Physical examination.
- Medical history.
- Laboratory tests: Blood and urine tests to assess the patient's health status.

### Treatment:

Treatment is discussed based on the severity of the condition. It includes:

1. Reducing the pressure on the area.
2. Maintaining good healthy nutrition.
3. Wound care.
4. Nonsteroidal anti-inflammatory drugs to control the pain.
5. Topical or oral antibiotics to treat infections.
6. Surgery to remove damaged tissue and close the wound in serious cases.

### Prevention:

1. Change the seating or sleeping position constantly.
2. Make sure to examine the skin on a daily basis.
3. Keep the skin clean by washing and drying it thoroughly.
4. Wash bed linen and make sure it does not crease after you put it on bed.
5. Support areas with bony prominences with gel, air or water cushions.
6. Maintain good nutrition and fluid intake.
7. Maintain a healthy weight.
8. Exercising regularly.
9. Quit smoking.

### Instructions for people who spend most of their time in bed or on a wheelchair:

- Relieve pressure on affected areas, using proper pillows or mattresses.
- Change your seating position when using the wheelchair (right and left) every 15 minutes.
- Lift your upper body - if possible - by pressing on the sides of the chair to lift the body from the seat.
- Avoid using circle-shaped (donut) pillows as they can increase pressure on the surrounding tissue.
- Change the position of your body in bed every two hours.



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- Seek help when you can't change the position.
- In case of using diapers, make sure the area is dry after cleaning the urine and stool.
- The ability to feel pain or discomfort can help detect warning signs and the need to change the position.

### Frequently Asked Questions:

- **Is it contagious?**

Bedsore are not contagious. However, they should be treated with caution if accompanied by pus or bacterial infection.

- **Can it be left untreated?**

They cannot be left untreated because they continue to develop to more serious stages.

### Clinical Health Education Department

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