

Bed Sores in Intensive Care Unit Patients, Prevention and Treatment

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Bed sores known as pressure ulcers are one of the most common complications likely to be seen in patients of Intensive care units (ICU) who are on a ventilator, or due to sedation and are bedridden for a longer duration. It is defined as localized injury to the skin/ underlying tissue over a bony prominence due to pressure. The incidence of pressure ulcers marks the quality of care towards patients in an institution and negligence in providing preventive care may lead to an increase in the risk of litigation and also increased healthcare costs.

Prevention

Prevention is better than cure, hence for preventing the risk of pressure ulcers some of the standards need to be followed:

1. Timely evaluating ICU patient's risk of Pressure Ulcers.
2. Assessment within 12 hours after admission of the patient.
3. Relieving direct pressure and taking proper care of the skin.
4. Maintaining good hygiene.
5. Intake of plenty of fluid every day and eating a balanced diet.
6. Telling the doctor or nurse in case the patient observes any skin change or is in the discomfort zone.
7. Repositioning the patient every two hours within the ICU to prevent stress on vulnerable areas and carrying out skin assessment.
8. Standard nursing rules must be followed for patient care.

Treatment

- Remove the pressure from the sore by time to time movement of the patient.
- Cleaning the wound with water and a bar of mild soap. In case of open sores clean the wound with a saline solution each time the dressing is done.
- Controlling incontinence.
- Removing dead tissue for proper healing of the wound.
- Frequent dressings in order to protect the wound and accelerate healing.
- Using oral antibiotics or antibiotic creams to treat the infection faster.
- Negative pressure wound therapy.
- Some bed sores worsen and may require surgical interventions.

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