Pressure ulcers

Pressure ulcers are often referred to as pressure sores, bedsores or decubitus ulcers. They occur as the result of skin being damaged by pressure in one place for long periods. The most common areas of concern are elbows, heels and buttocks but they can occur in any area.

People who are immobile in bed or use wheelchairs or other chairs for long periods must monitor their skin condition regularly for redness or other signs of damage. The most common sign that a pressure sore is beginning to develop is a reddened area of skin, which does not disappear after relief of pressure. Normally you would expect this to disappear within 30 minutes. Other signs are an area of skin that feels warmer to touch, a change in texture, dry or flaky skin or, for those with dark skin, a change in colour.

It is important to give immediate, thorough and ongoing care to these areas. Pressure ulcers are painful, unpleasant and can give rise to infection. In the worst cases it can be life-threatening if left untreated.

Sources of Advice

- Talk to your GP, District Nurse or other care staff about prevention which is so much better and easier than a cure.

- Promptly contact your GP, District Nurse or other medical professional involved in your care if you suspect you or the person you look after has or is developing a pressure ulcer. Do not leave it to see what happens. Carry out the advice given carefully and thoroughly.

- The National Institute for Clinical Excellence (NICE) produces a leaflet called ‘Pressure ulcers: prevention and pressure-relieving devices’, which gives up to date advice. It does not mention muscular dystrophy specifically however the advice is the same for everyone, no matter what their condition.

NICE also produces a booklet for medical professionals called ‘Pressure ulcer prevention: Pressure ulcer risk assessment and prevention’. It includes information about the use of pressure-relieving devices (beds, mattresses and overlays) to prevent pressure ulcers in primary and secondary care. You could suggest your medical support team obtain a copy of this booklet. Their booklets are free.
Your local NHS Trust will have a Tissue Viability Service, usually staffed by a nursing specialist. You can ask about a referral to them from your GP or District Nurse. To find the contact details for your local NHS Trust you can look on the NHS web: [www.nhs.uk](http://www.nhs.uk)

**Conclusion**

Remember your skin is the largest organ in your body and is vitally important for health and well-being. Looking after your or your child’s skin well, particularly in vulnerable areas, will pay dividends and may prevent the need for special mattresses and garments, even skin grafts or lengthy hospital stays.

If you have feedback about this factsheet please email [info@musculardystrophyuk.org](mailto:info@musculardystrophyuk.org).

**Disclaimer**

Whilst every reasonable effort is made to ensure that the information in this document is complete, correct and up-to-date, this cannot be guaranteed and Muscular Dystrophy UK shall not be liable whatsoever for any damages incurred as a result of its use. Muscular Dystrophy UK does not necessarily endorse the services provided by the organisations listed in our factsheets.

**Here for you**

The friendly staff in the care and support team at the Muscular Dystrophy UK’s London office are available on [0800 652 6352](tel:+448006526352) or [info@musculardystrophyuk.org](mailto:info@musculardystrophyuk.org) from 8.30am to 6pm Monday to Friday to offer free information and emotional support.

If they can’t help you, they are more than happy to signpost you to specialist services close to you, or to other people who can help.

[www.musculardystrophyuk.org](http://www.musculardystrophyuk.org)