



Skin and Wound Care

- What is the impact of aging on skin?
- How and when to check skin?
- How are acute and chronic wounds prevented and treated?
- What are common complications of wounds?



The Role of Skin

- Skin is the body's largest organ.
- Skin is a barrier that protects the body and:
 - regulates body temperature
 - maintains water and electrolyte balance
 - senses painful and pleasant stimuli
 - participates in vitamin D synthesis



Aging Skin



[State Government of Victoria, n.d.](#)

- As skin ages it:
 - becomes thinner and less elastic, develops folds and wrinkles
 - loses moisture and can become dry and more likely to split and crack
 - loses its underlying fat layer, making it looser
 - is less able to detect temperature changes or pain
 - is prone to bruising and tears
- Because of these changes, older adults are at a higher risk of skin damage and wounds.

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3

Risk Factors

- Older individuals are more likely to have skin related problems if they are:
 - underweight or overweight
 - have poor nutrition
 - have difficulties washing or drying any part of their skin (e.g. folds beneath abdomen or hard to reach areas between toes)
 - have diseases such as diabetes, spinal or limb paralysis, or reduced or poor circulation

[Registered Nurses Association of Ontario, 2011](#)

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4

Checking Skin

- When inspecting skin check for:
 - changes to skin colour
 - swelling, growths or skin breakage
 - areas of pain and discomfort or areas that have less feeling
 - areas that feel warm or hot to the touch
- Pay close attention to:
 - areas that are most likely to break down such as lower back, space between buttocks, or where skin that is tight over bone, like heels and elbows
 - areas that are in contact with or close to medical devices like straps, masks, monitoring leads, braces, splints and cervical collars
 - the heels and toes if someone wears anti-embolic stockings

[Registered Nurses Association of Ontario, 2011](#)

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Assessing Dark Pigmented Skin



[Clark, 2010](#)

- When looking at darkly pigmented skin check:
 - colour changes that occur at the site of pressure
 - areas of previous pressure ulcers where skin may be lighter than original colour
- Note that the area of skin under pressure may be purple/blue or violet in colour.

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When to Check Skin

- Check skin when:
 - assisting with care such as bathing or dressing
 - returning home from a hospital stay or from an institution
 - there is a change in health and the individual is in bed longer, or spending long periods sitting

Healthy Skin

- To promote healthy skin:
 - eat a nutritional diet with extra calories and protein
 - drink lots of fluids
 - adapt the bathing schedule - bathing dries out skin and a person does not need a full bath or shower every day
 - avoid hot water and use a mild skin cleanser
 - being gentle when cleaning skin and repositioning an individual
 - apply lubricating moisturizers and creams with minimal or no alcohol content
 - maintain mobility to improve circulation to skin tissues

Types of Wounds

- **Acute wounds** progress through the normal stages of wound healing and show definite signs of healing within four weeks.
 - Traumatic wounds (including tears and abrasions)
 - Surgical wounds
- **Chronic wounds** are wounds that fail to heal in a predictable way. Ulcers are common chronic wounds in older adults and include:
 - Diabetes ulcers
 - Pressure ulcers
 - Venous ulcers

[Harvard Health Publishing, 2018](#)

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9

Acute Wounds: Skin Tears



- **Skin tears** can be simple, such as a split in the skin, or complex to include skin loss, blood clots and bruising.
- Skin tears are the most common injury that older people experience.
- Usually from minor trauma or injury, occurring most frequently on upper limbs.
- Skin tears can become infected and become chronic wounds.
- Many skin tears occur during moving people, especially transfers in bed.

[London Health Sciences Centre, n.d.](#)

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10

Acute Wounds: Surgical Wounds

- **Surgical wounds** are cuts or incisions from surgery.
- To treat surgical wounds:
 - shower and bathe based on the surgeon's orders
 - use prescribed dressings
 - change dressings as prescribed and check for redness or swelling, pain, wound edges being intact or not, or a change in wound drainage (colour or amount)

[Kirkland-Kyhn, Generao, Teleten & Young, 2018](#)

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11

Chronic Wounds: Diabetic Ulcers

- **Diabetic ulcers** are open sores or wounds that occur in patients with diabetes, usually located on the bottom of the foot.
- To prevent diabetic ulcers:
 - inspect feet daily for redness, or breaks in skin between toes and temperature changes
 - practice regular skin care such as bathing feet and moisturizing with alcohol-free lotion
 - ensure footwear fits properly, checking the inside for irregular, sharp surfaces or foreign objects
 - get regular toenail care by a professional

[Kirkland-Kyhn, Generao, Teleten & Young, 2018](#)

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12

Chronic Wounds: Venous Ulcers

- **Venous ulcers** are shallow wounds that occurs when the leg veins don't return blood back toward the heart the way they should.
- To prevent and treat venous ulcers:
 - wear daily compression bandages
 - lose weight, if overweight
 - follow a walking regimen
 - elevate legs for 30 minutes, three times per day
 - change dressing as prescribed and check for redness, swelling, pain or a change in wound drainage (colour, odor or amount)

[Kirkland-Kyhn, Generao, Teleten & Young, 2018; HealthLink BC, 2018](#)

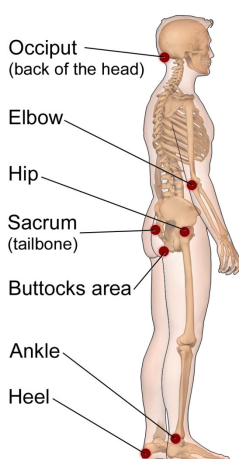
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13

Chronic Wounds: Pressure Ulcers



[Mayo Clinic, 2020; Photo License](#)

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14

- **Pressure ulcers**, also called bedsores, are injuries to the skin and tissue resulting from prolonged pressure on the skin.
- Pressure ulcers most often develop on skin that covers bony areas of the body, such as the heels, ankles, hips and tailbone.
- People most at risk of bedsores have medical conditions that limit their ability to change positions or cause them to spend most of their time in a bed or chair.

Preventing Pressure Ulcers



- Do not rub or massage bony areas.
- Do not use donut type devices or products that allow pressure to other areas.
- Use pillows, supports or foam wedges to prevent pressure between bony areas.
- Shift weight periodically.

[Registered Nurses Association of Ontario, 2011](#)

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15

When to Contact a Health Care Provider

- Let the health care provider know if:
 - there is a fever or the chills
 - there is an increased amount of pain, swelling, or redness
 - the edges of the wound do not meet
 - there is a change in wound drainage (colour, odor, or amount)
 - calluses have developed (these need to be removed by a professional)

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16

Wound Dressing Change

- Wash hands before and after changing a dressing.
- Wear gloves during all dressing changes.
- Dispose of the old dressing in a plastic bag before placing it into the garbage.
- Cleanse the wound before applying a new dressing. The wound can be cleansed by the individual using water in the shower, or by the caregiver, who can spray saline on the wound to clean it.

Wound Complications

- The following are complications that can occur with wounds:
 - **Cellulitis** is a potentially life-threatening bacterial infection of the skin and can result in blood poisoning. The infection can spread to other parts of the body.
 - **Bone and joint infections** can develop if a pressure injury makes its way into the joints or bones, resulting in damage to cartilage and tissue and reducing limb and joint function.
 - **Sepsis** is an infection of the bloodstream and can be caused by bacteria entering through sores. There is a serious risk of shock, organ failure and death.

eFit eLearning Course Handout



You Have Completed the Skin and Wound Care eLearning Course!

For more information on this and other topics, please visit our [eFit Resources for Individuals & Caregivers on www.sagelink.ca](http://www.sagelink.ca).

We appreciate your feedback. Please contact info@sagelink.ca if you have suggestions, comments or have any questions.

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19

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20