

## DRESSING SELECTION FOR SKIN TEARS



## OVERVIEW OF SKIN TEARS

Skin tears are traumatic wounds that may result from a variety of mechanical forces such as shearing or frictional forces, including blunt trauma, falls, poor handling, equipment injury or removal of adherent dressings.

In fragile or vulnerable skin (e.g. in aged or very young skin), less force is required to cause a traumatic injury. The ageing of the worldwide population means that incidence of skin tears is increasing (Le Blanc et al, 2018).

Skin tears are a significant problem that require prompt and appropriate management and treatment. They can be painful, affect quality of life and cause distress to the patient. As skin tears are frequently underreported or misdiagnosed, the full extent of the practical and financial burden to healthcare systems is not fully known.

Skin tears are often preventable wounds that create avoidable cost and patient discomfort and pain, so prevention and management in practice are of key importance. If a patient develops a skin tear, a risk assessment should be completed according to local policy, to highlight future risks and how to prevent them from reoccurring.

Severity of skin tears can vary, and can be identified and classified using the ISTAP Classification System (Le Blanc et al, 2013).

### ISTAP Classification System



#### **Type 1: No skin loss**

Linear or flap tear which can be repositioned to cover the wound bed



#### **Type 2: Partial flap loss**

Flap loss that cannot be repositioned to cover the wound bed



#### **Type 3: Total flap loss**

Total flap loss exposing entire wound bed

## DRESSING SELECTION FOR SKIN TEARS

When skin tears occur, it is vital that the wound care products chosen will optimise wound healing and not increase the risk of further skin damage (Le Blanc et al, 2018).

The ideal dressing for managing skin tears should:

- Be easy to apply and remove
- Not cause trauma on removal
- Provide a protective anti-shear barrier
- Optimise the physiological healing environment

- Be flexible and mould to contours
- Provide secure, but not aggressive, retention
- Manage exudate and afford extended wear time
- Optimise quality of life and cosmetic factors
- Be non-toxic

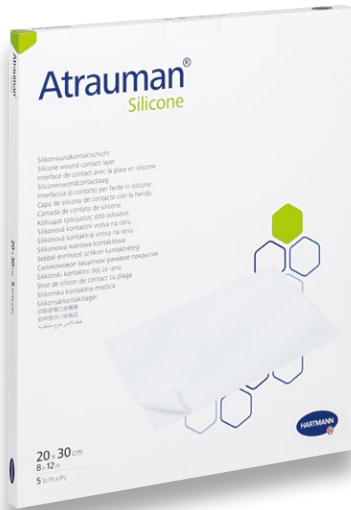
The key consideration in skin tears should be to avoid further damage to the skin. This primarily means using a dressing that is suitable for fragile or vulnerable skin, and capable of managing exudate, to avoid the risk of moisture-associated skin damage (MASD; Fletcher et al, 2020).

## DRESSING OPTIONS

### Atrauman® Silicone

A wound contact layer designed for the treatment of fragile, painful, acute and chronic wounds, Atrauman® Silicone is ideal for use in skin tears due to:

- Gentle, secure wound care, suitable for patients with fragile or vulnerable skin
- Protection of the wound bed and granulation tissue, preventing further damage to the skin
- Provision of skin care by keeping the wound edges soft and supple, encouraging healing.



### Zetuvit® Plus Silicone Border

A superabsorbent dressing that is also suitable for use in patients with fragile or vulnerable skin, Zetuvit® Plus Silicone Border has the added ability to manage fluid, so is ideal for use in skin tears where exudate is present, helping to avoid damage to the surrounding skin. Zetuvit® Plus Silicone Border:

- Benefits from a transparent silicone border that protects the periwound skin and is designed to keep the periwound skin area visible, which can be cut to aid application when needed
- Features a backing film, which is showerproof, breathable, bacteria and viral proof
- Includes a blend of cushioning cellulose fluff and fluid-retaining superabsorbent particles (SAP) particularly suitable for treating exuding wounds.



## DRESSING SELECTION TOOL USING ATRAUMAN® SILICONE AND ZETUVIT® PLUS SILICONE BORDER

### Treatment plan for skin tears

- 1 Stop bleeding**  
Apply pressure and elevate if appropriate.

- 2 Irrigate wound**  
Remove debris and any partial haematoma with sterile gloved finger, swab or sterile forceps.



- 3 Perform wound assessment**  
Categorise and document the type of skin tear, include size and note the colour and viability of flap.

- 4 Type 1 and 2 only**  
Moisten flap if dry and realign without stretching, using a gloved finger or moist non-woven swab.



For type 3

- 5 Dress wound**  
Using Atrauman® Silicone or Zetuvit® Plus Silicone Border (whichever is most appropriate) for atraumatic protection.



If using Zetuvit® Plus Silicone Border draw an arrow in the direction the dressing should be removed to protect flap viability.

- 6 Dress wound**  
If using Atrauman® Silicone, cover with Zetuvit®/ Zetuvit® Plus (depending on exudate levels) for padding and absorberency. Secure with a tubular or retention bandage.



- 7 Review**  
If flap is non-viable, pale, dusky or darkened — review after 24–48 hours. Otherwise review after 4–5 days.

Fletcher J, Beekman D, Boyles A et al (2020) *International Best Practice Recommendations: Prevention and management of moisture-associated skin damage (MASD)*. Wounds International, London

Le Blanc K, Baranoski S, Christensen D et al (2013) *International Skin Tear Advisory Panel: A tool kit to aid in the prevention, assessment, and treatment of skin tears using a Simplified Classification System*. *Adv Skin*

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Le Blanc K, Campbell K, Beekman D et al (2018) *Best practice recommendations for the prevention and management of skin tears in aged skin*. Wounds International, London

Wounds International (2017) *Quick Guide: Managing skin tears in practice*. Wounds International, London



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