RESSURE ULCERS **AUTHORS' BIOGRAPHIES**

Pauline Beldon

Pauline Beldon is Tissue Viability Nurse

Consultant for Epsom and St Helier Hospitals NHS Trust and a Trustee of Wound Care Alliance UK. a charity committed to the development of tissue viability education and service development for all those who work within that speciality.

Rebecca Penzer

Rebecca Penzer is Community Dermatology

Nurse Specialist for Norfolk PCT and Clinical Editor of Dermatological Nursing. Rebecca is Trustee to the Psoriasis Association and member of the All Party Parliamentary Group on Skin (APPGS) oversight committee.

Anita Rush

Anita Rush is Clinical Nurse Specialist at Berkshire Community Equipment Services. She has implemented health and safety policies, comprehensive training programmes and has designed a risk assessment form which has been accepted trust-wide for all practitioners. Her findings from her dissertation focusing on bariatric care have been presented at workshops and conferences in the UK, Europe and at international level. In conjunction with the Disabled Living Foundation, Anita has developed a bariatric website.

KEY POINTS

- >> As well as having a high risk of acute wounds, most notably non-healing surgical wounds due to dehiscence or infection, bariatric patients also have a higher risk of chronic wounds such as pressure ulcers, venous ulcers, and diabetic foot wounds.
- >> Pressure ulcer prevention is part of the holistic care management pathway for bariatric patients.
- >> Education is key to good bariatric management.
- >> Skin barrier creams should not be used in isolation, but as part of a series of interventions aimed at keeping the skin barrier intact.
- ▶ For patients with sensitive skin, healthcare workers should attempt to avoid perfumed products.
- >> Pressure ulcers commonly occur at the site of bony prominences such as heels, ischial tuberosities, the sacrum, shoulder, ears and occiput.
- >> Pressure ulcers represent a massive financial burden to the NHS.
- >> In the elderly patient, once a flexion contracture has formed, it is often irreversible with muscle wasting.
- Development of flexion contractures can be prevented.

