

VENICE PLASTIC SURGERY

A.E. HAAS, M.D.

Cosmetic, Reconstructive, Face, Breast, and Hand Surgery

Wound Care Medicine

Wounds - Bed sore treatment

In review, we used to call these decubitus ulcers or bed sores but that terminology is incorrect. Decubitus is from the latin word meaning to lie down but these sores or wounds may occur from being in any position. For example wounds occur on the buttock from being in the sitting position too long and occur on the elbow from resting the arm too long on a hard table. The cause is unrelieved pressure on one area.

How are these pressure wounds treated? We always mention preventative care here. For you folks taking care of your significant other at home read on. These wounds are difficult to care for so prevention is very important. The key is to change the position of the person frequently. High pressure on a body part is tolerable for 10 or 20 or 30 minutes but not for an hour or two.

If a person is seated, lean them to one side a little, then lean them the other way. Lie them down, have them seated leaning half way back, then seated straight up. Pillow rotation is helpful. Put one under the arm, then move it under the elbow, move it closer to the hand. A knee pillow may be moved under the thigh a little then under the calf some. The important thing is to move things around a little bit and often. Do not just put a pillow there and leave them for hours at a time. Yes, I have seen pressure sores occur even under soft pillows that were never moved.

When lying down people need to be leaned side to side, then flat on the back. Again use pillows to further your options of positioning. Do not forget the elbows and the back of the head, the scalp area is prone to pressure sores also and needs rotation. Move the head from side to side a little, move the chin up and down a little. Be careful. Some cannot tolerate a lot of movement here. The important thing is not big changes in position but rather frequent small movements.

Doing all these pressure relief movements may be limited by medical conditions. For example a person who just had a hip repair may have limitations of positioning as directed by the bone doctor or orthopedist. People with severe arthritis in the neck and spine will have limitations of movements. One must be aware of these limitations. Always ask you doctors for assistance before moving patients around.

When treatment is needed your doctor should be consulted. Often these pressure sores are larger and deeper than they appear on the outside. When they get real big surgery is needed. Because many of these sores occur over bony areas the plastic and reconstructive surgeon needs to cover the area with a thick piece of tissue. A thin skin graft never works. Usually the wound is cleaned up then filled with muscle tissues. These provide a cushion and muscle brings in good new circulation. This helps initial healing and helps prevent the same wound from happening again. Most surgery can be done on an outpatient basis these days. The rehab facilities and the home health nursing services are helpful.

**The above represents the opinion of A. E. Haas, M.D.
Venice Plastic Surgery, Venice Wound Center, Lakeside Medical Center**

Just call us directly. No referral needed unless required by your insurance company

836 Sunset Lake Blvd # 103, Venice, FL 34292
(941) 492-4775