

Consultation and Advice

Specialised staff at Denmark's two spinal cord injury centres in Glostrup and Viborg provide advice and guidance regarding the prevention of pressure ulcers, suspicion of pressure ulcers, and treatment of pressure ulcers. The staff can, among other things, assist with treatment strategies, aids, mobility, and relief.

During consultations, an ulcer treatment plan is created:

Glostrup: Through Sundhedsplatformen or as a video consultation with the district nurse and/or occupational therapist. Depending on where the patient lives and the condition of the ulcer, the patient may be consulted in person, and be assessed by all relevant staff.

Viborg: Consultations take place in the clinic through in-person visits, phone calls or e-mail, depending on the need.

If you are a patient, relative, or home nurse, the spinal cord injury centers would like to hear from you.

Contact to the spinal cord injury centres

Glostrup Clinic (Bodil Eskesen Centret, BEC)

Phone: +45 38631993 (8 a.m. - 9 a.m. on weekdays)

Phone: +45 38631601 (9 a.m. - 2 p.m. on weekdays)

Viborg Clinic (Vestdansk Center for Rygmarvsskade, VCR)

Phone: +45 24759140 and +45 21424596 (8 a.m. - 1 p.m. on weekdays)



We are an alliance of health professionals and users across the country, who aim to promote interdisciplinary and cross-sector collaboration in the effort of preventing, treating and rehabilitating pressure ulcers in individuals with spinal cord

injuries. For inquiries regarding The Pressure Ulcer Alliance or about this brochure, please contact tryksaarsalliancen@outlook.dk

This brochure can also be read and downloaded at Specialhospitalet.dk/pressure-ulcer or at www.rygmarvsskade.info

The Pressure Ulcer Alliance's partners: Vestdansk Videnscenter for Neurorehabilitering • Videnscenter for Neurorehabilitering, Rigshospitalet • Plastikkirurgisk Afdeling, Odense Universitets-hospital • Vestdansk Center for Rygmarvsskade, Hospitalsenhed Midt • Bodil Eskesen Centret, Rigshospitalet/Glostrup • Brugerrepræsentanter • Rygmarvsskade.info • Specialhospitalet for Polio- og Ulykkespatienter (Rødovre og Marselisborg) • Dansk Selskab for Neurorehabilitering • Center for Specialrådgivning, Aarhus • Dansk Selskab for Sårheling • Kolding Kommune • Sårcenter Viborg, Hospitalsenhed Midt.

Tryksårsalliancen, Oktober 2023.



PRESSURE ULCERS AND SPINAL CORD INJURIES

Keep an eye on red areas

This brochure is for YOU who:

- are at risk of developing pressure ulcers
- have had pressure ulcers and want to avoid them in the future
- meet pressure ulcers in your work
- face pressure ulcers as a caregiver

A red area requires action from day 1



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Why do pressure ulcers occur?

Individuals with spinal cord injuries are at high risk of developing pressure ulcers on their buttocks due to:

- Reduced mobility
- Affected sensory perception
- Skin changes
- Decreased muscle volume in the buttocks and hips

Points of attention

- Inadequate relief (e.g., cushion, mattress, car seat)
- "Dead" foam or too much/too little air in the cushion
- Unstable sitting position or prolonged periods in the same position
- Altered sitting position (e.g., new cushion, new chair, tilt, leg brace due to fracture, leg amputation)
- Pressure from aids (e.g., shower chair/seat, recliner, sports chair)
- Pressure during transfers (e.g., transfer board, lift sling, sharp edges)
- Pressure and tissue displacement (e.g., toileting, sitting in bed)

A pressure ulcer can develop in just a few hours if the surface does not provide sufficient pressure relief. Prevention and swift treatment are therefore crucial



How is a pressure ulcer detected?

An initial superficial red mark (redness may be challenging to see on dark skin), changes in temperature, and a firm/hard-defined skin area can be some of the early signs that should be taken seriously as it can quickly progress into a deep pressure ulcer. The following are signs of tissue overload:

- Redness or discoloration of the skin
- Swelling and potential changes in tissue temperature and/or firmness
- Pain
- Signals from the nervous system (chills, sweating, spasms, nerve pain)
- Fever

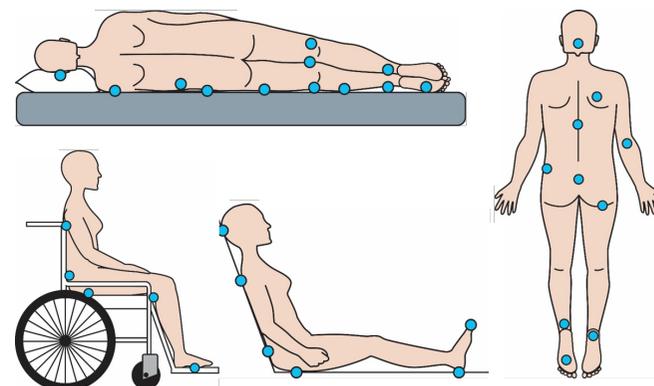
Take action on day 1

When the red area is detected, appropriate treatment should be initiated immediately.

- Relieve pressure on the skin, and avoid further stress/pressure
- Check the surface - remove the cause
- Contact specialised healthcare professionals
- Take photos with the assistance of a partner, personal caregiver, or home nurse

THE EXPOSED AREAS

Pressure ulcers often occur in areas where the bone lies just under the skin.



Here are the most exposed areas in sitting and lying positions.

Illustration: Kent Community Health NHS Foundation Trust

Pressure ulcers can have significant consequences

Healing a pressure ulcer requires extended bed rest, leading to severe limitations in everyday life. This will impact job, education, family life and general health. Prolonged isolation can lead to depression.

How to prevent pressure ulcers?

- Inspect/check the skin on the buttocks, hips, and heels daily. Use a mirror if needed
- Change sitting/lying positions frequently
- Avoid shear forces on the skin when changing positions while sitting and lying down
- Regularly inspect/check the cushion (especially air cushions that can puncture or slowly deflate)
- Use appropriate aids in collaboration with an occupational therapist
- Be attentive to the need for adjustments and intensifying routines, as the body is constantly changing (due to factors such as illness and aging)

Activity and Seating Position Analysis

At the municipal level, treatment should be carried out in collaboration with an occupational or physiotherapist, who can assist in identifying the cause of the pressure ulcer through an activity and seating position analysis.

Citizens and professionals can also seek free advice from the national knowledge and specialised advisory organization VISO: <https://sbst.dk/viso/>