Pressure Sore Prevention After a Spinal Cord Injury

Pressure sores, also called pressure wounds or bed sores, are injuries that result from prolonged immobility when soft tissues are compressed between bony prominences and external surfaces.

When are Pressure Sores Likely?



Risk During Acute Hospitalization

It's estimated that 20%-50% of people with a new SCI will develop at least one pressure wound during their acute hospitalization. The odds of acquiring a pressure sore during acute hospitalization are 4.5x greater for people with complete SCI than those with incomplete SCI.

First Year Post-SCI is Highest Risk

During the first year after SCI, the probability of experiencing a pressure sore is ~41%. People with neurological disorders, particularly SCI, have a 25%-85%

lifetime risk of developing a pressure injury.

Previous Pressure Injuries Increase Risk

A previous pressure wound greatly increases the risk of a recurrence of a pressure wound. 36%-50% of people with SCI who've acquired a pressure wound develop a recurrence in the same area.

1-3 Million Pressure Injuries Occur Each Year in the United States

Common Pressure Sore Locations

Most pressure sores are acquired while lying in bed. Studies estimate that over 70% of pressure sores develop in regions near the hips, thighs, and buttocks (sacrum, ischium, trochanter, and perineal).

Pressure sores can also develop on the heels and feet. In some rare cases, during long-term bed rest, sores can develop



on the shoulders, elbows, back of the head, and ears.

Hips & Thighs

*Less common locations where sores may occur during long-term bed rest.

Dangers of Pressure Sores



Infection & Sepsis

Any break in the skin can become infected. Pressure sores can develop localized infections, cellulitis, and osteomyelitis. An infected sore can lead to sepsis which is life-threatening.

Autonomic Dysreflexia

Autonomic dysreflexia is an overreaction of the autonomic nervous system to stimulation. Symptoms vary and can be severe. The pain caused by a pressure wound is likely to trigger AD in anyone with a T6 injury or higher.

Pressure Sore Treatment

Pressure Relief & Cleaning

First, pressure needs to be relieved so that oxygen and nutrients can be supplied to the site. The wound must be cleaned to eradicate infection and allow new tissue to grow. The underlying cause of the injury must be determined and corrected.

Nutrition Counseling

Nutrient-dense foods and supplements are essential to avoid malnutrition. Protein supplements are especially important to accelerate the repair and synthesis of enzymes involved in the healing process.

Flap Reconstruction Surgery

Severe pressure sores that have damaged tendons, muscles, or bones may require flap reconstruction surgery. Flaps of skin, muscle, fascia, and/or bone are transplanted to reconstruct the damaged area.

Treatment of pressure sores typically costs between \$20,900 and \$151,700







Source

Vecin, Nicole M., and David R. Gater. "Pressure Injuries and Management after Spinal Cord Injury."



