Literature Review: The Prevention of Pressure Ulcer

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**Introduction**

A pressure ulcer can be described as a type of injury that has been localized. This injury either affects the skin or the underlying body tissue. In most cases, it occurs over a bony prominence. It is mainly triggered by unrelieved pressure. Predisposing factors can be either intrinsic or extrinsic. Intrinsic factors that contribute to this condition include feeding on an imbalanced diet, comorbidities, limited mobility, and aging skin. On the other hand, extrinsic variables include pressure exerted on the skin, friction, and excess moisture. Pressure ulcers are more rampant on the lower half of the body. Two-thirds of this condition occurs in the area around the pelvis while a third affects the lower limbs. Additionally, the elderly especially people above 70 years are becoming prone to this condition. The number of this population is continuing to rise disturbingly especially among individuals diagnosed with other chronic conditions (Jaul et al., 2018). Around a third of this population tend to undergo a surgery due to hip fracture. Also, the prevalence of this condition is relatively high among individuals with spinal injuries. Notably, 18.1% of the elderly population are diagnosed with this condition (Jaul et al., 2018). Most cases of pressure ulcers are reported in hospitals. According to Jaul et al. (2018), around 5947 in patients who have been a hospital in various healthcare facilities are diagnosed with pressure ulcers. The elderly inpatients diagnosed with orthopedic conditions constitute the majority in this group due to limited mobility. The significant increase in the prevalence of this condition necessitates for some intervention measures. In this case, a multifaceted evidence-based educational intervention should be implemented.

**A comparison of Research Questions**

In this case, two research questions need to be addressed:

* Does the implementation of a multifaceted evidence-based education intervention reduce the prevalence of pressures ulcers among late adulthood stroke and post-surgical inpatients in the inpatient rehabilitation center?
* Does the absence of formal education reduce the prevalence of pressures ulcers among late adulthood stroke and post-surgical inpatients in the inpatient rehabilitation center?

The two intervention measures focused at lowering the incidence of pressure ulcers among the target patient population. Multifaceted evidence-based education intervention is designed to lower the high number of pressure ulcers’ cases in the inpatient rehabilitation center. This intervention measure aims at enhancing the knowledge and skills of the nurses regarding patient care (Hommel et al., 2017). The knowledge and skills will, in turn, enable these nurses to take care of patients with pressure ulcers in these settings. Additionally, these nurses can use the acquired knowledge to create awareness among the patients and their caregivers, thus enhancing continuity of care at home (Porter‐Armstrong et al., 2018). But the absence of formal education aims to reduce the prevalence of pressures ulcers among this patient population without applying the nursing knowledge related to the effective management of pressure ulcers. Consequently, the use of a multifaceted evidence-based education intervention will be more effective in managing this condition since it is based on scientific evidence and facts. In other words, the applied strategies have tested and provided the desired results. On the contrary, no scientific evidence regarding the effectiveness of the absence of formal education in the management of this condition.

**A comparison of sample populations**

Pressure ulcers affect various patient populations, including individuals diagnosed with stroke and post-surgical in patients who are in the inpatient rehabilitation center. The prevalence of this condition is also high among the elderly population aged 70 years and above. Nonetheless, individuals diagnosed with stroke and post-surgical inpatients are at a higher risk of suffering from this condition. This group becomes the most vulnerable to pressure ulcers due to their reduced immunity and limited movements. These individuals are mostly confined in wheelchairs since they cannot make movements on their own. Others spend most of their time in bed. These wheelchairs and beds cause muscle strain due to the pressure exerted at particular body regions. This strain, in turn, damages the tissues surrounding the affected region. Although elderly people are prone to this condition, their prevalence is relatively low than that of individuals diagnosed with stroke and post-surgical inpatients. Elderly people can make some movement unlike stroke and post-surgical inpatients whose movement is limited. Additionally, some elderly individuals have good immunity, which reduces the risk of pressure ulcers.

**A comparison of the Limitations of the Study**

The researcher is likely to incur some challenges during the study. The two major challenges in this study are due to the sample population. The primary sample population for this study are individuals diagnosed with stroke and post-surgical in patients who are in the inpatient rehabilitation center. Additionally, the researcher focuses on evaluating elderly people aged above years since they are also prone to this condition. In the case of stroke and post-surgical inpatients, the researcher is likely to incur minimum limitation while gathering data required for the study. The caregivers will answer all the research questions satisfactorily. Additionally, a minimum time will be taken to gather this data since the sample population is under the same location, the inpatient rehabilitation center. Therefore, it is possible to complete the study within the planned duration of 3 months. But conducting the study among the elderly population is likely to have more limitations. This target population might fail to understand the research question, thus providing the wrong information. Additionally, this target population is spread out. Therefore, more time than estimated might be taken to gather data, thus making it difficult for the researcher to complete the study within the estimated period of three months.

**Conclusion**

The implementation of a multifaceted evidence-based education intervention contributes greatly towards reducing the prevalence of pressures ulcers among late adulthood stroke and post-surgical inpatients in the inpatient rehabilitation center. This measure equips the nurses with knowledge and skills about patient care. This knowledge, in turn, enables the nurses to take care of these inpatients while in the inpatient rehabilitation center, thus lowering the prevalence of pressure ulcers among this population. On the contrary, the absence of formal education is not effective in managing pressure ulcers among the sample population. This intervention measure does not provide the nurses taking care of the targeted population with evidence-based knowledge that can enhance their practices. Due to the effectiveness of the multifaceted evidence-based education intervention in managing pressure ulcers among the target population, further research needs to be conducted. Researchers should focus on studying the effectiveness of this intervention measure on minimizing the prevalence of other health issues other than pressure issues. Additionally, a study can be conducted to assess whether this intervention measure will be effective in other settings other than the inpatient rehabilitation center.

**References**

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