Skin Care

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What is Skin?

- Epidermis: The thin, top layer of skin surface.
- Dermis: The thicker layer underneath the surface. The dermis contains:
  - Blood vessels: tubes that carry blood through the body, with oxygen and food
  - Nerves: fibers that carry sensations to and from the brain
  - Oil glands: organs that secrete an oily lubricating fluid
  - Sweat glands: organs that separate waste products from the blood and secrete them in sweat
  - Hair follicles: organs that create hair
- Fatty Tissue: Layer of fat under the skin. While not part of the skin, the fatty tissue provides a protective layer of padding(to prevent injury to underlying bones and muscles) and insulation (to keep heat in).

What Does the Skin Do?

- Controls body temperature:
  - Releases heat through sweat
  - Constricts and expands surface blood vessels to insulate or cool the body
- Protects against injury and disease:
  - Covers and pads muscles and bones, preventing damage
  - Forms a barrier against harmful organisms and infection
- Provides sensations:
  - Nerve endings sense danger
  - Sensitive to pressure, pleasure, pain, and temperature

What Does the Skin Do Cont.

- Creates vitamin D:
    - Produced by sunlight on the skin
- Cares for itself:
    - Self-Lubricating with oil glands
- Warns of disease:
    - Changes in color, temperature, or moistness may signal illness

The Aging of Skin: What Happens

- The skin and fatty layer get thinner
- The skin becomes less elastic
- Oil glands produce less oil, so skin is dry
- Blood vessel walls get thinner and more delicate, so they break easily
- Circulation of the blood slows down, so the skin is not getting as much oxygen and nutrition from the blood, causing the skin to become poorly nourished and fragile

The Aging of Skin: What Happens Cont.

- Because of these changes in the skin, older people:
  - Tend to feel cold
  - Suffer from skin tears
  - Heal slowly
  - Become wrinkled
  - Develop pressure sores

Caring for Older Skin: What to Do

- Keep the skin clean:
  - Pat dry, don't rub, when washing or drying
  - Use powder sparingly- excessive powder can cause irritation
- Keep skin lubricated:
  - Use lotions liberally
  - Frequent bathing with soap will dry the skin- use lotion cleansers
- Keep skin creases and folds dry
- Keep clothes and bedding dry
- Eat nutritious food and drink lots of water

Caring for Older Skin: What to Do Cont.

- Change position often to improve circulation and prevent pressure sores
- Don’t disturb moles
- Massage the skin, but avoid bony projections and irritated areas: Massage around but not directly on them
- Use chair cushions and good beds
- Inspect skin daily for redness, tears, blisters, scrapes, or irritated areas
- Report problems to a nurse or doctor

Skin Problems

- Decubitus ulcers (bed sores or pressure ulcers)
  - Causes:
    - Sustained pressure on the skin compresses the blood vessels and prevents nutrition and oxygen from getting to the skin cells. Over time, the skin tissue dies and decubitus ulcers develop
    - The skin is under pressure where the bones press against the skin tissue, especially when the weight of the body or a body part is pushing down on a pressure point
    - Body fluids such as urine and feces contain damaging chemicals. When they remain on the skin, they cause moist areas that become irritated and develop sores
    - Friction from clothing or bedding can injure the skin and lead to skin ulcers

What to Report to the Nurse or Supervisor

- A red pressure area that does not become normal after 20 minutes without pressure
- A reddened area of the skin that does not turn white when you push on it
- A skin area that is warm or hot to touch
- Any swelling
- Any opening in the skin
- Blisters, tears, craters, rashes, or holes
- Scrapes or abrasions
- Drainage or weeping from the skin

Basically anything new or abnormal report it!

Preventing Skin Problems

- Encourage or assist patients to:
  - Walk or exercise several times per day
  - Keep their skin clean, dry, and lubricated
  - Keep their bedding free of wrinkles
  - Eat well and drink plenty of liquid
- For patients that are in chairs most of the time:
  - Encourage or assist them to stand, walk, or shift their weight every 15 minutes.
  - Teach them how to do chair push-ups with their arms
  - Teach them to sit with their knees at the same level as their hips, with their thighs horizontal to the chair. This will distribute their weight along their thighs and away from pressure points
  - If a patient cannot do these things, he/she should return to bed after an hour in a chair

Preventing Skin Problems Cont.

- For patients that are in bed most of the time:
  - Teach them how to use side rails and the trapeze to change position frequently, at least every two hours. Be available to assist them if necessary. Even small shifts in body weight are helpful.
  - When you are assisting a patient to change position, move him or her carefully so you do not create friction and shearing between the skin and the bedding or clothing.
  - The head of the bed should be raised as little as possible, no more than 30 degrees, to prevent sliding and pressure on the bony areas. If it must be raised higher for eating it should be lowered an hour later.
  - Massage the skin when possible, but avoid massaging pressure points or irritated areas.
  - For patients that use special chair cushions or mattress overlay pads, check to be sure that the pads are thick enough to do the job. Place our hand under the pad while the patient is on top of it- if you can feel the patient's body through the cushion, the pad is too thin.

Preventing Skin Problems Cont.

- For patients with pressure sores:
  - Keep weight and pressure off any reddened areas and wounds
  - User pillows to elevate or seperate body parts and keep pressure off an area, such as a pillow under the calf to raise the heel off the bed, or a pillow between the legs to keep the knees from touching.