Pressure injury prevention pilot study: a follow-up

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Although there is evidence to indicate silicone foam border dressings can reduce PI in critical care and high dependency patients, their benefit in the hospitalised general medical-surgical patient population is less clear.

Eighty patients assessed as being high risk for PI were recruited and randomly allocated to either a control group (routine care) or an intervention group (routine care and a sacral prophylactic dressing).

At each 72 hour point following recruitment, de-identified high resolution digital photographs were taken of each participant's sacrum and emailed to a blind assessor for evaluation.

The study aimed to assess feasibility criteria to inform a larger study. In total, 67 participants completed the study.

The findings

Only three participants were assessed as having a PI—these patients all had significant co-morbidities (two were allocated to the dressing group) and all PIs were assessed as Stage 1.

The low incidence rate may be due to the impact of PI prevention and management strategies and guidelines which provide advice on assessment, prevention and treatment strategies, staff education and ongoing evaluation (Australian Commission on Safety and Quality in Health Care (ACSQHC) 2011, Australian Wound Management Association 2012, National Pressure Ulcer Advisory Panel 2014).

The blind assessor was able to correctly identify participants in the dressing group 67% of the time due to atraumatic markings left on the skin from the dressing.

While the majority of patients found the study dressing comfortable, there were challenges associated with length of time the dressing remained in situ due to:

- the edges of the dressing rolling-up as participants mobilised
- reduction of adherence during hygiene cares
- removal of the dressing during lumbar surgery or spinal block.

Although a program of information sessions was undertaken to prepare nursing staff in the participating wards prior to the commencement of the study, evaluation feedback indicated many clinicians were not aware of the study before it started.

This suggests more time is needed to prepare nursing staff for research studies.

Given the very low incidence of PI, a sample size of 1500 (750 in each group) will be required to test the effectiveness of these dressings in reducing the incidence of PI.

Nursing leaders and clinicians at the Princess Alexandra Hospital provided support for this study.

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References


