Pressure injuries (PI) have significant impacts for patients, families, staff, and health care organisations. Yet the majority of PIs are preventable.

PIs occur in all health care settings, with some patient groups at greater risk than others. The prevalence of reported PIs internationally and nationally ranges from 3% to 48%, yet much of the literature suggests that PIs are under-reported.

PIs place considerable financial burden on the health care system and the community, with estimated costs in 2001-02 around $285 million.

In addition, patients experience pain, social isolation, reduced mobility and sometimes even death.

PIs have long been recognised as an indicator of the quality of nursing care. Despite PI treatment and prevention guidelines, PIs continue to be a major concern for clinicians and their patients.

To date, there has been little research conducted on the patient’s role in PI prevention. Nurse researchers from NCREN are now conducting a descriptive study on precisely this topic.

Research

Descriptive data was collected using semi-structured observations, a retrospective medical chart audit and interviews.

Observations were conducted on 241 hospitalised medical patients who were considered at high risk of developing PIs.

Observations relative to the mobility and position of the patients were recorded at 30 minute intervals and continued over 24 hours.

Twenty patients from the sample were invited to participate in a 15-20 minute interview about their perceptions of their role in the prevention of PIs.

Twenty-eight days of data were collected over a three-month period in four acute care medical units at two large south-east Queensland hospitals.

Data analysis

Although data analysis is still ongoing, the preliminary results are informative.

Of the 241 patients observed, there were more males than females (58.9% to 41.1%), and the average age was 67 years.

The average hospital length of stay was nine days although this varied between three to 109 days.

Preliminary analysis of the observations suggests that hospitalised medical patients are more active than first thought.

On average, patients in this study changed their position on 16 separate occasions during a 24-hour period.

Patient’s favoured the supine position five times more than any other position, with 50% of patients spending 50% of the time in this position.

Further, 12% of patients spent 80% of the time in the supine position.

Preliminary analysis of the interviews indicates that patients have varying knowledge of PIs, with reduced movement identified as the key contributing factor to PI development.

The majority of patients did not know the role nutrition played in PI prevention.

Only a few patients reported they received education from clinicians about PI risk factors and strategies to prevent them.

These results are preliminary and the data analysis is ongoing, but current indications are that the patient role in PI prevention is underestimated.

The June edition of tqn reported on the establishment of the National Centre of Research Excellence in Nursing (NCREN) in Queensland. We are now pleased to report that future editions of tqn will include a regular feature on the research being conducted by our colleagues at NCREN.

For more information visit www.griffith.edu.au/health/centre-research-excellence-nursing

Sharon Latimer