



Moisture damage guide

The pH of the skin normally stands at between 4.4 and 5.5. Changes occur in the skin of elderly patients, which may predispose them to skin damage. We need to maintain the normal pH of the skin and the normal bacteria found on the skin of elderly patients.

Antiseptics should not be used routinely.

Barrier products should not be used routinely. Careful assessment should be undertaken to identify any reversible causes of skin irritation before a decision is made to use a cream or lotion.

The reason for excess moisture should be addressed in the first instance e.g. more regular change of pads. Barrier preparations should only be used where there is a need to reduce contact with moisture. Barrier preparations should not be used solely as a moisturiser.

Healthy Low Risk Skin



Pink
Well perfused
Normal Bowel Habit
Continent or Catheterised
No other risk factors

Treatment

 Regular cleansing using emollient as a soap substitute as part of the normal daily routine

At risk skin



Pink
Well perfused
Dry or scaly to touch
Loose stools
Urinary incontinent
No other risk factors

Treatment

- Emollient as a soap substitute
- Mediderma S cream daily
- As a general guideline Medi Derma-S can be reapplied after every third wash, although may require more frequent application if skin is being exposed to higher levels of moisture from incontinence.

Moisture lesion



Red / blotchy / irregular / lumpy Shiny May be hot May be painful Areas of broken skin

Treatment

- Proshield Spray only to be used for incontinence that cannot be removed with soap substitute.
- Proshield Plus.
- Continue for 5 days

 if no improvement
 refer to CN or TV
- Once resolved return to At Risk Pathway
- Proshield needs to be reapplied after every encounter of incontinence.
- Acute prescription only (not repeat)

Application Guide:

- Medi derma S and Proshield: pea-sized amount of cream will cover an approximate area the size of a palm
- Do not over-apply, skin should always be clearly visible after application.
- Apply an even coating to clean skin and allow to fully dry before reapplication of incontinence pads or adhesive devices.

The following treatments are not recommended and should *not* be applied:

- Sudocream (blocks skin pores)
- Conotrane (contains antiseptic)





