



# What You Need to Know About MS and Bed Sores

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## The Danger of Bed Sores

Bed sores (also known as pressure sores) can be a serious concern if you are living with advanced MS, because of the amount of time you spend lying down or sitting in a wheelchair. These skin lesions occur when the skin is under constant pressure, impairing the blood supply to the skin, fat and muscles. This causes the skin to break down and increases the risk of infections and deep ulcers.

## Stages of Bed Sores

There are several stages of bed sores, each worse than the last. They are:

- **Stage I** – Skin appears pink or red but is not broken.
- **Stage II** – Abrasions and blisters may start to appear as the skin starts to wear away.
- **Stage III** – Skin over the sore has worn away. The wound can go as deep as the fat layer.
- **Stage IV** – Muscles, tendons and bones may be exposed.

## MS and Bed Sores: Prevention

Understanding the risk factors for bed sores will help you take action sooner rather than later.

- **Stay active** – Decreased mobility is the biggest risk factor for bed sores, so stay as active as you can for as long as you can.
- **Shift frequently** – If you are in a wheelchair or are in bed most of the time, shift your position regularly to avoid constant pressure on one area. If you're not able to move yourself, your caregiver will have to help you with this. Aim to shift your position every 15 minutes in a chair and every couple of hours in a bed. Do regular stretching exercises if you're able.
- **Maintain a healthy weight** – Aim for an optimal weight: not overweight but not underweight either. If you are overweight or obese, those extra pounds will put additional pressure on your skin. If you are underweight, the skin will be in close contact with your bones, and the bony prominences will irritate the skin. Pay attention to your diet and nutritional requirements.
- **Keep clean** – You or your caregiver will need to wash your skin daily with a gentle cleanser and warm water. Dry well and use talcum powder to absorb excess moisture. If you experience bowel or bladder incontinence and are using diapers, bacteria like E Coli can cause skin and urinary infections. Change diapers and clean your skin regularly.
- **Aim for an ideal moisture balance** – Not too dry, not too moist. Again, you need to find balance. Dry skin can get cracked, damaged and infected easily. Too much moisture can also make a good environment for bacteria and fungi to grow. Stay well-hydrated and use lotions, but not excessively. There are lotions available specifically designed to prevent bed sores.
- **Check for injuries** – Since nerve function is affected by MS, you may experience decreased skin sensation. Decreased skin sensation can be problematic, as you can not feel a skin injury (which can turn

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into a bed sore) and as a result, not treat it properly. Examining your skin regularly will help you spot any changes or injuries that need taking care of.

- **Other conditions** – Other conditions such as diabetes, anemia, and heart diseases can affect your body's ability to heal/repair damaged skin and fight infections. Be extra vigilant if you have one of these in addition to your MS.
- **Good mattress/cushion** – Have a comfortable mattress and pillow so the pressure applied by your body on the mattress is optimally distributed. Your wheelchair should also have a comfortable cushion.

## Treating Bed Sores

It is easier to prevent bed sores than it is to treat them, so always aim to avoid them. However, if you or a loved one has developed bed sores, consider these tips:

- **Properly clean and dress wounds** – Stage I bed sores can be carefully cleaned and, if necessary, dressed at home. More advanced sores will likely require attention from a healthcare professional.
- **Eat more protein** – When a person has bed sores, lab tests will always show low total protein levels. This indicates the person needs to be taking in more protein, which is essential for rebuilding body tissue. Make sure you're getting enough protein in your diet.
- **Stay hydrated and nourished** – Drink plenty of water and herbal teas to avoid dehydration, and eat a healthy, balanced diet.
- **Take vitamins and minerals** – Your skin needs nutrients to heal. Vitamin A, silica, vitamin E, vitamin C, selenium, iodine, omega 3 fats and B vitamins are critical to overcoming bed sores. Don't be afraid of a recommendation from a clinical nutritionist to take high doses of nutrients.
- **See a doctor** – See your doctor to discuss treatments for bed sores that have developed blisters and swelling. The sores are treated with medication and protective coverings. If they are more advanced and affect undying tissues, you will need to spend time in the hospital, you'll likely be prescribed antibiotics, and you may need surgery.

## Dr. Donna's Story

The saddest case of MS and bed sores was preventable. The woman was in her 80s and had been bedridden for over 25 years. She was untroubled by bed sores for all but the last three years of her life. The unfortunate situation was that the nursing care that was responsible for bathing her and keeping her skin healthy didn't perform the job thoroughly enough. The nurses discovered patches of skin on her back and buttocks that were breaking down and called in a medical doctor who traveled to bedridden patients. He wrote a prescription.

But she wasn't getting better and was transported to a hospital's emergency room. The ER doctor in charge was shocked at her condition. Her entire back, from the back of her head to her tailbone, was covered with Stage 3 to Stage 4 bed sores, with areas so severe that the muscles in some places had disappeared. There was a serious infection that had set in as well, and it was affecting the pelvis bone.

"Who was taking care of her?" The doctor asked the family members who had accompanied her.

"We had a home health care agency taking care of her skin. They told us everything was under control and the areas were healing," the son said.

"Healing?! These areas are filled with dead tissue. You need to fire them right now – they don't know the difference between dead tissue and a scab. What are their names? I may file a complaint myself," the doctor said.

The woman was in intensive care for several months, but the deep areas of her back never did heal. Fourteen days before her death, her daughter was in the room when the nursing staff was changing the dressings on her back.

"I almost threw up," she said. "Her back looked like raw meat. There was an area near her ribs eaten away by

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the bed sores. I could see her lung there. The nurse said that it was so exposed that it could puncture if she moved the wrong way in the bed.”

The woman died of her bed sores, not her multiple sclerosis.

## **Conclusion**

Don't resign yourself to the inevitability of bed sores because you have advanced MS. You and your healthcare team can work together to prevent bed sores from developing.