

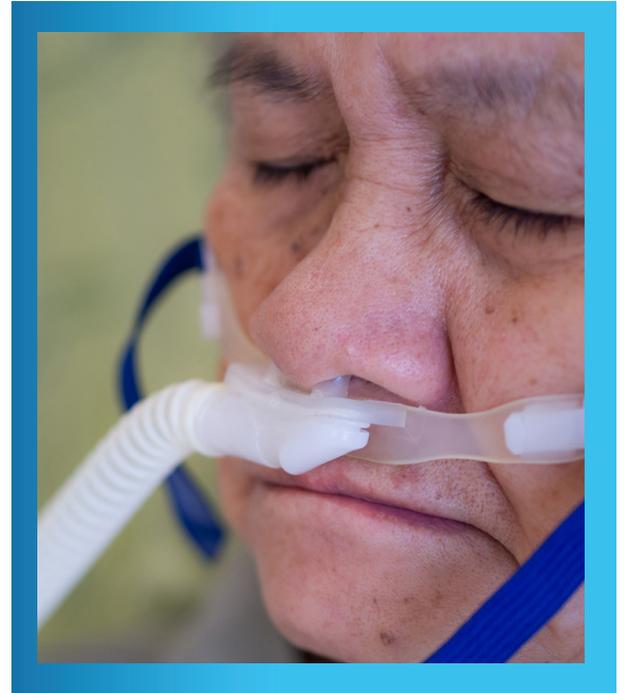
Cause and Management of Mucosal Membrane Pressure Injuries

Q:

I am a Regional Nurse in Wichita, KS and have a question about Mucosal Membrane Pressure Injuries (MMPI). We have admitted several patients from acute care facilities who have been treated for COVID-19. Various areas of skin breakdown on the nose and lips are frequently identified. Would you review the cause and management of MMPI?

A:

The pressure injuries on the mucous membranes are usually attributed to a medical device or tube. Nasogastric or orogastric tubes, oxygen cannulas or masks and endotracheal tubes pose a risk of causing local ischemia to tissue in the nose and mouth. Once a mucosal injury occurs the risk of other problems increases including pain, infection and even malnutrition, if pain from oral wounds makes it difficult to eat and drink.



MMPI's are staged differently from cutaneous pressure ulcers. The layers of tissue are so thin and so similar that it would be too difficult to tell by visual inspection which layer is exposed. The position of the NPIAP is that pressure injuries on mucosal surfaces are not to be staged using the pressure injury staging system nor described as partial or full thickness. Pressure injuries on mucous membranes are documented as mucosal pressure injuries without a stage. ¹

Treatment options may include:

1. Medical-grade honey ²
2. Topical corticosteroids reduce inflammation and pain ³
3. Pressure prevention devices, tube holders, cushions, and padding on skin and/or device itself to prevent contact.

1. National Pressure Injury Advisory Panel. Mucosal pressure ulcers: an NPUAP position statement. NPUAP; 2008. https://cdn.ymaws.com/npuap_site-ym.com/resource/resmgr/position_statements/mucosal_pressure_ulcer_posit.pdf Accessed August 30, 2020.

2. Simon A, Traynor K, Santos K, Blaser G, Bode U, Molan P. Medical honey for wound care – still the latest resort? Evid Based Complement Alternat Med. 2009;6(2): 165-173. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2686636/#B48>. Accessed August 30, 2020.

3. Weinberg MA, Segelnick SL. Management of common oral sores. U.S. Pharmacist. 2013;38(6):43-48. https://www.medscape.com/viewarticle/807035_1 Accessed August 30, 2020.

Dressing Change Anxiety

In the current COVID environment with social isolation, loneliness and other situational factors, our residents may express signs and symptoms of depression and anxiety in unique ways.

In the case of Mr. Lory, months ago his dressing change was routine while he chatted with the nurse about his grandchildren. In the past few weeks he began to respond to the treatment with aggression and screaming complaints of pain. The wound was healing but the behavior demonstrated during the dressing change warrants investigation and additional assessment. Could these be signs and symptoms of depression and anxiety?

By nature, depression is a silent symptom and may not be clearly identified as other health issues. Depression is a state of low mood and aversion to activity. It can affect a person's thoughts, behavior, motivation, feelings, and sense of well-being. It may feature sadness, difficulty in thinking, a significant increase or decrease in appetite and time spent sleeping.

In addition to the updated care plan interventions for mood and behavior, gentle wound care may include:

- Pre-medicate for pain as indicated and position for comfort
- Cleanse wound bed in the shower or with warmed solution
- Select products that are easily applied and removed
- Minimize frequency of dressing change



If a wound is draining - Is it infected?

Drainage is a good thing; it maintains a moist wound environment and supports healing. Assess the resident for local or systemic signs and symptoms of infection including increased pain, temperature, redness and swelling before jumping to conclusions.



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