

Jonathan Rosenfeld's Nursing Homes Abuse Blog

Medical Facilities Are Not Doing Enough To Prevent Pressure Ulcers On Patients' Heels

Posted by [Jonathan Rosenfeld](#) on October 26, 2010

Surprisingly, heel pressure sores are poised to overtake the buttocks as the most common area of the body where pressure sores develop.

While the underlying causes of heel-related pressure sores remain similar to their peers:

- Mobility
- Friction
- Shear
- Unrelieved pressure

These factors combined with the physical structure of the foot make the heel area particularly susceptible to developing pressure sores in both the acute care (hospitalization) and long-term setting (nursing homes).

As many as 1 in 3 patients in acute or long-term care setting may develop some type of pressure sore on their heel during their admission. While heel pressure sores, certainly can vary in their degree of severity, advanced pressure sores are painful, disabling and embarrassing for the patient.

Factors relating to the development of pressure sores

Jonathan Rosenfeld represents victims of nursing home abuse and neglect throughout the country. For more information please visit Nursing Homes Abuse Blog (www.nursinghomesabuseblog.com), Bed Sore FAQ (www.bedsorefaq.com) or call Jonathan directly at (888) 424-5757.

The physical make up of the foot also makes the treatment of heel pressure sores difficult for the facility and particularly disabling for the patient. The calcaneus is the largest bone in the foot, yet covered by relatively little muscle making it particularly susceptible to damage from unrelieved pressure.

Even relatively young and healthy patients in nursing homes and hospitals are at risk for developing pressure sores on their heels because many staff in nursing homes and hospitals are simply unaware of the potential risk and commonly used bed sore risk assessments may not take into consideration elements unique to heel pressure sores.

In particular, patients with suffering from hip and leg fractures are at risk, along with patients in intensive care who may have compromised blood pressure due to trauma are at an increased risk for developing pressure sores on the heels. Facilities need to be focused on these groups of patients --- and any patient with limited mobility, as they remain at risk for developing heel, foot and ankle pressure ulcers.

Preventative Techniques To Reduce Heel Pressure Sores

There is no secret to reducing the incidence of heel-related pressure sores. Rather, facilities need to be attuned to common sense precautions to reduce the amount of pressure exerted on the heels.

Common preventative techniques to reduce the development of pressure sores on the heels include:

- Using pillows and towels to prop up the patients legs, thereby eliminating or reducing the contact between the heels and the underlying surface
- Use of specially designed foam boots on patients feet
- Use of specialty mattresses
- Treatment For Patients With Heel Pressure Sores

As with pressure sores that form in other areas of the body, it is far easier to prevent pressure sores on the heels than to treat them after they develop. Treatment plans generally include keeping the wounds clean and dry to allow the tissue to heal.

In situations involving advanced pressure sores (stage 3 or 4), the wound may need a procedure referred to as a debridement where the dead tissue is removed during a surgery. When heel pressure sores advance or become infected, there may be few options other than to amputate the leg.

Prognosis for Patients With Heel Pressure Sores

Most medical experts remain cautious when issuing a prognosis for a patient with pressure sores on their heels. Even after the wound on the heel is tended to, heel pressure sores are particularly disabling for people of all ages and put patients at risk for other medical complications that may arise from prolonged immobility.

Given the severity of pressure sores on the heel and foot that developed during an admission to a medical facility, a careful analysis of the care should be evaluated from a medical-legal standpoint. If the facility failed to employ proper care, a lawsuit may be initiated by the patient or family for medical expenses, pain and disability.

Jonathan Rosenfeld represents victims of nursing home abuse and neglect throughout the country. For more information please visit Nursing Homes Abuse Blog (www.nursinghomesabuseblog.com), Bed Sore FAQ (www.bedsorefaq.com) or call Jonathan directly at (888) 424-5757.

Related:

If you are looking for a comprehensive article on the development of pressure sores on patients' heels, I suggest that you take a look at: Heel Pressure Ulcers: Stand Guard, Adv Skin Wound Care. 2008 Jun;21(6):282-92; quiz 293-4.

Langemo D, Thompson P, Hunter S, Hanson D, Anderson J. University of North Dakota College of Nursing, Grand Forks, ND, USA.

Are bed sores on the heels common?

Are assisted living facilities responsible for the prevention of bed sores in their patients?

Are the development of bed sores at a nursing home considered to be a form of nursing home abuse?