

# Bed Sore FAQs

QUESTIONS & ANSWERS FROM A NURSING HOME LAWYER

## Are bed sores on the heels common?

Yes. Call them what you'd like bed sore, pressure sores or decubitus ulcer on heels are the second most common area for bed sores to develop (after the buttock or coccyx area). Particularly in the bed-bound population, patients are susceptible to developing bed sores on their heels due to the inherent bony prominences and thin tissue covering the heels. These physical features of heels can result in the rapid accumulation of pressure that may result in decreased blood flow, break-down of tissue and subsequent development of decubitus.



Another complicating factor that can make bed sores on the heels difficult to diagnose and treat is that many non-ambulatory patients have peripheral neuropathy, that may result in decreased sensation in the heel area. The decreased sensation and diminished ability to perceive pain may result in a delay in treatment.

Given the inherent risk of developing bed sores on heels and ankles, medical facilities should regularly examine patients who are at risk. In addition to encouraging patients to be active (if possible), staff in nursing homes and hospitals should provide pressure relieving devices such as: boots, heel protectors, pressure relieving mattresses or even pillows to help alleviate pressure on the heel area.

When bed sores on heels are not timely treated, complications such as [gangrene](#) and [osteomyelitis](#) may develop. Depending on the severity of the wound, common treatments include [surgical debridement](#) and possibly [amputation of the foot or leg](#).

Below is an example of heel protectors:



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