

THE ROLE OF NURSES IN THE PREVENTION AND MANAGEMENT OF PRESSURE ULCERS IN CRITICALLY ILL PATIENTS

Irgasheva Raykhon

Surkhandarya Branch of the Republican Scientific Center for Emergency Medical Care

Abstract: This article explores the essential role of nurses in the prevention and management of pressure ulcers among critically ill patients. Pressure ulcers are one of the most common complications in intensive care units (ICUs) due to patient immobility, impaired circulation, and critical health conditions. The study analyzes the causes and risk factors of pressure ulcers, nursing responsibilities in early detection and prevention, as well as effective management strategies. Based on research results, the article provides practical recommendations to improve nursing care and reduce the incidence of pressure ulcers in critically ill patients.

Keywords: Pressure ulcers, critically ill patients, nursing care, prevention, intensive care unit, wound management.

Relevance of the Topic: Pressure ulcers remain a serious problem in modern intensive care practice. According to international statistics, approximately 10-20% of patients in ICUs develop pressure ulcers due to prolonged immobilization and physiological instability. The presence of pressure ulcers increases the risk of infection, prolongs hospitalization, and worsens patient outcomes. Nurses play a key role in preventing this complication through early risk assessment, proper skin care, repositioning, and implementation of preventive measures. Therefore, the topic is highly relevant for improving the quality of care in ICUs.

Purpose of the Study: The purpose of this study is to analyze the role of nurses in the prevention and management of pressure ulcers in critically ill patients and to develop evidence-based recommendations for nursing practice in intensive care units.

Materials and Methods: The research was conducted between October 2024 and January 2025 in the Intensive Care Unit of the Termez Regional Multidisciplinary Medical Center. The study involved:

- 30 critically ill patients who were bedridden and at risk of developing pressure ulcers;
- 20 ICU nursing staff members. The following research methods were used:
- Assessment of patient medical records;
- Application of the Braden Scale to evaluate the risk of pressure ulcers;
- Direct observation of nursing interventions;
- Surveys and interviews with nursing staff;

- Statistical analysis of the incidence and severity of pressure ulcers.

Research Results

The results of the study demonstrated that:

1. Among the 30 critically ill patients, 12 (40%) developed stage I or II pressure ulcers during hospitalization.
2. The primary risk factors identified were prolonged immobility (85%), hemodynamic instability (65%), and malnutrition (60%).
3. Nursing interventions such as repositioning every two hours, use of pressure-relieving mattresses, and daily skin assessments significantly reduced the risk of ulcer development.
4. The survey of nursing staff revealed that 70% of nurses were aware of pressure ulcer prevention protocols, but 30% noted lack of time and staff shortage as barriers to effective prevention.
5. Implementation of a standardized nursing care plan and regular educational sessions for nurses led to a 25% reduction in the incidence of new pressure ulcers over the study period.

Conclusions: The study confirms that nurses play a crucial role in the prevention and management of pressure ulcers in critically ill patients. Early risk assessment, regular patient repositioning, proper skin care, and continuous nursing education are essential measures to minimize the occurrence of pressure ulcers. Improving working conditions and increasing staff numbers may further enhance the effectiveness of nursing interventions and improve patient outcomes.

References

1. European Pressure Ulcer Advisory Panel, National Pressure Injury Advisory Panel and Pan Pacific Pressure Injury Alliance. (2019). *Prevention and Treatment of Pressure Ulcers/Injuries: Clinical Practice Guideline*. EPUAP/NPIAP/PPPIA.
2. Black, J. M., & Hawks, J. H. (2020). *Medical-Surgical Nursing: Clinical Management for Positive Outcomes* (10th ed.). St. Louis: Elsevier.
3. Braden, B. J., & Bergstrom, N. (1987). A conceptual schema for the study of the etiology of pressure sores. *Rehabilitation Nursing*, 12(1), 8–12.