

Moisture Lesions vs Pressure Ulcers

Differentiation Between Pressure Ulcers and Moisture Lesions

Location

Moisture Lesions	A combination of moisture and friction may cause moisture lesions in skin folds, but most commonly they are present in the anal cleft.
Pressure Ulcers	A pressure ulcer is most likely to occur over a bony prominence.

Necrosis

Moisture Lesions	There is no necrosis in a moisture lesion.
Pressure Ulcers	A black necrotic scab on a bony prominence is a pressure ulcer classification 3 or 4.

Shape

Moisture Lesions	Diffuse, different superficial spots are more likely to be moisture lesions. In a kissing ulcer (copy lesion) at least one of the wounds is most likely caused by moisture.
Pressure Ulcers	Circular wounds or wounds with a regular shape are most likely pressure ulcers, however, the possibility of friction injury has to be excluded.

Edges

Moisture Lesions	Moisture lesions often have diffuse or irregular edges
Pressure Ulcers	If the edges are distinct, the lesion is most likely to be a pressure ulcer.

Depth

Moisture Lesions	Moisture lesions are superficial (partial thickness skin loss). In cases where the moisture lesion gets infected, the depth and extent of the lesion can be enlarged.
Pressure Ulcers	Pressure ulcers vary in depth depending on classification.

Colour

Moisture Lesions	If redness is not uniformly distributed, the lesion is likely to be a moisture lesion.
Pressure Ulcers	If redness is non-blanchable, this is most likely a pressure ulcer. For people with darkly pigmented skin, persistent redness may manifest as blue or purple.

3M™ Cavilon™ Durable Barrier Cream

Purple to
protect intact
skin



Why use Cavilon durable barrier cream?

- Cost effective - highly concentrated so a little goes a long way
- Proven to reduce incontinence dermatitis and associated with a significant decrease in Grade 1 pressure ulcers, when used as part of a skin care protocol¹
- Resists wash off - no need for frequent re-application
- Provides a breathable skin protectant barrier
- Will not clog or interfere with absorbency of incontinence pads²
- Does not decrease tape or dressing adhesion

3M™ Cavilon™ No Sting Barrier Film

Blue for use on
broken skin



Why use Cavilon no sting barrier film?

- Unique formulation - forms a waterproof film barrier when applied to the skin
- Non-cytotoxic - safe to use on peri wound and excoriated skin
- Alcohol free - does not sting, even on broken or irritated skin
- Non-petrolatum based - does not clog the linings of protective incontinence pads
- Cost effective - provides up to 72 hours skin protection³
- Transparent - allows easy monitoring of skin
- Easy application - single use sterile applicators (1ml and 3ml) and pump action spray for larger areas

To find out more about 3M™ Cavilon™ Skin Care Products contact us at
www.cavilon.co.uk or call 0800 616066 (answer phone).



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References:

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2. Hart J. Assessment of the incontinence pad blocking potential of 3M Cavilon Durable Barrier Cream compared with Sudocrem and Zinc and Castor Oil. *Nursing Scotland*. July/August 2002.
3. Dr Karin Issenberger, Jan Schuren, RN, BN, OTC, MSc - A comparative study of the Skin Protectant performance of five Barrier Films. 3M Germany Laboratory, Neuuss, Germany. 2004.

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