

SKIN TEARS SIMPLIFIED



This information leaflet is intended to give you information about skin tears and answer some questions that you may have about their management and treatment

SKIN TEARS SIMPLIFIED

Maintaining skin integrity can be challenging. Vulnerable skin can be defined as skin susceptible to damage as a result of a traumatic incident that would not normally damage the skin of a healthy individual.

Skin tears occur in individuals with fragile skin commonly neonates and older people which are considered to be largely preventable (Stephen- Haynes, 2013).

A skin tear is simply a traumatic wound resulting from partial or full separation of the outer layers of the skin (LeBlanc & Baranoski, 2011).

They occur due to shear and friction forces or blunt trauma causing the epidermis to separate from the dermis or both to separate from underlying structures and commonly occur on extremities (Ousey, 2009).

Skin tears are common in the elderly because of thinning skin, flattened ridges, loss of natural skin lubrication and increased capillary fragility (Benbow, 2009).

There tends to be a change in the deposition of subcutaneous tissue in specific areas such as the face and dorsal aspect of the hand (Benbow, 2009).

In neonates, the dermis is still developing and at full term the skin is only 60% of adult thickness. Neonates skin is also less elastic and more likely to be damaged by shear forces (Iring et al, 2006).

CAUSES OF SKIN TEARS:

There are a variety of causes creating skin tears. Factors that influence skin breakdown include:

- Ageing
- Position
- Mobility
- Mechanical and chemical trauma
- Exposure to irritants and allergens
- Medical conditions Medications (Ousey, 2009)



CLASSIFICATION OF SKIN TEARS

Skin tears can be classified by the degree of the severity and loss of the epidermal tissue using the Payne-Martin classification for skin tears which ranges the damage from Category I-III (Payne & Martin, 1993, and the STAR classification system (Carville et al, 2007).

SKIN TEAR CLASSIFICATION SYSTEM

Category I	Without tissue loss	In a linear or flap type skin tear. The dermis and epidermis have been pulled apart, as if an incision had been made
Category II	Two sub categories: less than 25% or more than 25% of the epidermal flap lost	Less than 25% =Scant Category II tear More than 25% = Moderate Category II tear
Category III	Full thickness skin loss	The epidermal flap or tissue is absent in this type of skin tear

(Payne and Martin, 1993)

STAR acronym is a prompt to the appropriate assessment and treatment of skin tears.

- Select appropriate cleanser and cleanse wound
 - Tissue alignment
 - Assess and dress
 - Review and reassess
- (Stephen-Haynes and Carvill, 2011)

MANAGEMENT OF SKIN TEARS

The most efficient way to manage these wounds is to re-apply the tear, bringing the edges together to heal by Primary Intention.

- Control bleeding (Haemostasis)
- Clean the wound
- Approximate the skin flap
- A dressing selection for the management of skin tears
- Allow for drainage and avoid increasing skin tension
- Use a non adherent contact layer
- Allow a 2cm border overlap around the wound when selecting the correct sized dressing
- Consider silicone based dressings to minimize trauma on removal
- Staples or silk sutures may cause further damage
- Pain assessment and management
- Review and reassess skin flap every 3-7 days
- Consider using saline soaks to minimize risk of damage
- Monitor for wound changes

REVIEW AND ASSESSMENT

- Monitor the wound for signs of infection, if infection present treat appropriately
- If no sign of infection, leave undisturbed
- Monitor for any deterioration of the wound and look out for any changes, assessing the wound itself and surrounding skin
- If the wound is non viable - debridement and/or additional dressings may be required - refer to local guidelines
- If no improvement or the wound deteriorates refer to a specialist

PREVENTION OF SKIN TEARS

The prevention of skin tears is an important aspect of skin care in older adults and neonates.

- A skin assessment should be undertaken to identify patients at risk
- Previous history of skin care
- Skin conditions
- Medications
- Risk of falls
- Nutritional status (Lloyd-Jones 2008)
- Good skin care is vital to maintain skin integrity
- Nutrition and hydration are vital to ensure skin is healthy and well hydrated
- Use of emollient creams can reduce the incidence of skin tears by 50% (Carville et al 2014)
- Create a safe environment
- Education of patients and Carers (Stephen-Haynes & Carville, 2011)

CONCLUSION

Having an awareness of the skin and the effects ageing has on the skin can help clinicians in the prevention and management of skin tears.

The implementation of an evidenced based skin tear management can help to manage patients effectively, prevent trauma and enable positive clinical outcomes.

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