

## PREVALENCE OF SACRAL SORE IN NURSING HOME AT KUALA KUBU BHARU

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**Introduction:** Sacral sore may develop due to pressure applied overtime on a skin surface that lead to damage and causing ischaemia of underlying structure. Bony prominence are most common site and highest incidence over sacral region in bedbound patient. There are multiple contributing factor that may lead to sacral sore such as malnutrition, dehydration, impaired mobility, advanced age and impaired sensation. External factors as pressure, friction, moisture and incontinence over pressure site may worsen the condition

**Methodology:** Total numbers of patient staying in Rumah Ehsan, Kuala Kubu Bharu were calculated and classified into 2 main groups, bedbound and semi dependent patient. Sacral region among bedbound patient were inspected. Presence of sore or not will be determined and classified based on the European Pressure Ulcer Advisor (EPUAP).

**Discussion:** There are 117 patients staying in Rumah Ehsan, Kuala Kubu Bharu. 77 percent of the patients were bed bound to which 15 percent has developed sacral sore. 12 patients are in grade 1, 1 in both grade 2 and 3. None of them were classified into grade 4 based on EPUAP classification. The incidence of sacral sore is higher in male patients compared to female patients.

**Conclusion:** Incidence of sacral sore is low in this centre in view of good preventive measures practiced. Most of the bed bound patients used ripple mattress and frequent positioning in which these steps helps a lot in further advancement of sacral sore grading. The early detection of the sacral sores with early initiation of treatment normal saline, gauze and jelonet also helps in reducing the incidence of advance sacral sore. Awareness and knowledge should be emphasized in managing bed bound patients to prevent from sacral sores. More training and continuous updated on management of sores should be given among health care worker in KKM.