



Revista Clínica Española

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ORIGINAL ARTICLE

Pressure ulcers in patients hospitalized in internal medicine: Associated factors and mortality[☆]

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IMPIMI researchers study[◇]

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Received 31 March 2016; accepted 19 July 2016

KEYWORDS

Pressure ulcers;
Mortality;
Internal medicine

Abstract

Objective: To determine the prevalence of pressure ulcers in patients hospitalized in internal medicine and the clinical factors and risk of death associated with its presence.

Patients and methods: Prospective cohort study with patients hospitalized in internal medicine. We recorded the age, sex, presence of pressure ulcers, degree of ulceration, Barthel index, Norton scale, major diagnostic category, length of hospital stay and weight of the diagnosis-related groups. We compared the clinical characteristics of the patients with or without ulcers and analyzed the mortality after 3 years based on the presence of ulcers.

Results: The study included 699 patients, 100 of whom (14.3%) had pressure ulcers (27 with grade I, 17 with grade II, 21 with grade III, 25 with grade IV and 10 with unknown grade). The Barthel index (OR 0.985; 95% CI 0.972–0.998; $p = .022$) and Norton scale (OR 0.873; 95% CI 0.780–0.997; $p = .018$) are independently associated with ulcers. Twenty-three percent of the patients with ulcers died during hospitalization, 68% died within a year, and 83% died within 3 years. The presence of pressure ulcers was independently associated with mortality (HR, 1.531; 95% CI 1.140–2.056; $p = .005$).

[☆] Please cite this article as: Díez-Manglano J, Fernández-Jiménez C, Lambán-Aranda MP, Landa-Santesteban MC, Isasi de Isasmendi-Pérez S, Moreno-García P, et al. Úlceras por presión en pacientes ingresados en Medicina Interna: factores asociados y mortalidad. Rev Clin Esp. 2016. <http://dx.doi.org/10.1016/j.rce.2016.07.003>

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[◇] More information about IMPIMI researchers study is available in [Appendix](#).

PALABRAS CLAVE

Úlceras por presión;
Mortalidad;
Medicina Interna

Conclusions: Pressure ulcers are common in patients hospitalized in internal medicine, and their presence is associated with higher short, medium and long-term mortality.

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Úlceras por presión en pacientes ingresados en Medicina Interna: factores asociados y mortalidad

Resumen

Objetivo: Determinar la prevalencia de las úlceras por presión en pacientes hospitalizados en Medicina Interna y los factores clínicos y riesgo de muerte asociados a su presencia.

Pacientes y métodos: Estudio prospectivo de cohortes con pacientes ingresados en Medicina Interna. Se recogieron la edad, sexo, presencia de úlceras por presión, grado de la úlcera, índice de Barthel, escala de Norton, categoría diagnóstica mayor, duración de la estancia hospitalaria y peso del grupo relacionado de diagnóstico. Se compararon las características clínicas de los pacientes con o sin úlceras y se analizó la mortalidad al cabo de 3 años en función de la presencia de úlceras.

Resultados: Se incluyeron 699 pacientes, de los que 100 (14,3%) presentaron úlceras por presión (27 de grado I, 17 de grado II, 21 de grado III, 25 de grado IV y 10 de grado no conocido). El índice de Barthel (OR 0,985 IC95% 0,972-0,998; $p = 0,022$) y la escala de Norton (OR 0,873 IC95% 0,780-0,997; $p = 0,018$) se asociaron de forma independiente con las úlceras. Durante el ingreso fallecieron el 23% de los pacientes con úlceras, al cabo de un año el 68% y a los 3 años el 83%. La presencia de úlceras por presión se asoció de forma independiente con la mortalidad (HR 1,531, IC95% 1,140-2,056, $p = 0,005$).

Conclusiones: Las úlceras por presión son frecuentes en los pacientes hospitalizados en Medicina Interna y su presencia se asocia con mayor mortalidad a corto, medio y largo plazo.

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Background

The aging of the population is reflected in the patients treated in the departments of internal medicine.¹ In one study, the mean age of patients hospitalized in departments of internal medicine was 79.9 years and has increased between 8 and 19 years in the last 20 years.² An increase has also been observed in the patients' disability.³

Elderly patients with disability frequently experience pressure ulcers as the result of concomitant diseases, immobility and, on occasion, deficient nutrition.⁴⁻⁶ Over the last 15 years in Spain, several epidemiological surveys have been conducted on pressure ulcers, and the prevalence in hospitalized patients remains approximately 8%.⁷⁻⁹ Sixty percent of pressure ulcers observed in hospitalized patients develop in the hospital, and a third of these are in advanced stages (III or IV).⁹ In 2013, the prevalence of pressure ulcers was 7.41% in the Spanish medical departments.⁹

Pressure ulcers can become infected and complicated easily, with bleeding, necrosis and pain appearing and requiring prolonged care. Pressure ulcers are considered a factor of poor prognosis for hospitalized patients and are associated with increased mortality, both if the patient presents them on admission and when they are acquired during hospitalization.¹⁰⁻¹²

The aim of this study was to determine the prevalence of pressure ulcers in patients hospitalized in internal medicine departments, the factors associated with their presence and their influence on short, medium and long-term mortality.

Patients and methods**Design**

The Minimal Intervention in Patients Hospitalized in Internal Medicine (IMPIMI) study^{13,14} ([Appendix](#)) is an intervention study with 2 parallel groups designed to reduce the duration of urinary tract catheterization and intravenous fluid treatment. The intervention was applied to 1 of 2 groups. Twice a week during the meeting of the therapeutic team of physicians and nurses, an assessment was conducted on withdrawing the bladder catheters, finalizing the intravenous fluid treatment, the onset of pressure ulcers and the early detection of delirium.

Procedures

The study included all unselected patients hospitalized in the department of internal medicine during the months of

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