

MOOC 11 Pressure Injury

Chapter 2 Common skin disorders in older adults

Moisture-Associated Skin Damage (MASD) and Skin Tear

Moisture-Associated Skin Damage (MASD) and skin tear are two skin conditions commonly found in frail older adults, which required proper skin care for prevention of skin injury.

Moisture-Associated Skin Damage (MASD)

MASD is classified as an irritant-contact dermatitis. The skin has developed inflammation and erosion caused by prolonged exposure to various sources of moisture, including urine or stool, perspiration, wound exudate, mucus or saliva. The excessive exposure of the skin to bodily fluids can compromise its integrity and barrier function, making it more permeable and susceptible to damage. It has negative impact on wellbeing and quality of life.


MASD is an umbrella term and subdivided into four categories:

- Incontinence-associated dermatitis (IAD) - skin damage associated with exposure to urine, stool or a combination of these
- Peristomal dermatitis – skin damage relating to colostomy, ileostomy/ ileal conduit, urostomy, suprapubic catheter, or tracheostomy
- Intertriginous dermatitis (intertrigo: where two skin areas may touch or rub together)
- Periwound maceration

Management of MASD

- Identify and manage the risks
- Remove irritants from the skin
- Minimize skin-on-skin contact and friction (intertrigo)
- Skin protection and management
 - Ensure skin integrity
 - Keep skin clean and dry
 - Use of skin protection products

For incontinence cases, we should pay attention to **incontinence associated dermatitis**. Please refer to **MOOC 10 Incontinence** to learn about proper skin care of incontinence among older adults.

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Skin Tear

International Skin Tear Advisory Panel defines skin tear:

“A skin tear is a traumatic wound caused by mechanical forces, including removal of adhesives. Severity may vary by depth (not extending through the subcutaneous layer)”

(LeBlanc et al, 2018)

Skin tear:

- occur at any age and any part of our body
- the most common sites of skin tear are upper and lower limbs
- one of the common skin problems among frail older adults that lead to skin injury or other complications
- preventable and treatable

In Chapter 1, you have learnt about how our skin aged and changed the composition. Aged skin has increased the risk for skin tear especially among the vulnerable old age group. You may see some frail older adults’ skins become vulnerable and easily injured. The ageing skin turns out to be thin, fragile, or easily bruises. If not care properly, it could be a series problem like pressure injury. Skin tear can become a chronic wound that is painful and distressing.

Risk factors for development of skin tear

Intrinsic	Extrinsic
Dry /thin /fragile skin Inelastic tissue Old age Impaired cognition Agitation Impaired nutrition	Trauma Corticosteroid use Skin cleansers Tape removal Daily care: transfers, dressing, bathing

Assessments of skin tear

- Assess wound using STAR or Payne-Martin classification

	Payne and Martin classification	STAR classification
CATEGORY IA	Can be realigned back to normal position Linear skin tear with separated epidermis and dermis, without tissue loss	A skin tear where the edges can be realigned to the normal anatomical position and the skin or flap colour is not pale, dusky or darkened
CATEGORY IB	Can be realigned back to normal position The epidermal flap completely covers the dermis within one millimetre of the wound margin	A skin tear where the edges can be realigned to the normal anatomical position and the skin or flap colour is pale, dusky or darkened
CATEGORY IIA	Cannot be realigned back to normal position. Scant tissue loss < 25% of the lost epidermal flap	A skin tear where the edges cannot be realigned to the normal anatomical position and the skin or flap colour is not pale, dusky or darkened
CATEGORY IIB	Cannot be realigned back to normal position. Tissue loss > 25 % of the lost epidermal flap	A skin tear where the edges cannot be realigned to the normal anatomical position and the skin or flap colour is pale, dusky or darkened
CATEGORY III	Complete tissue loss. The epidermal flap is absent	A skin tear where the skin flap is completely absent

Management for skin tear

- Identify the high-risk cases and implement the prevention program.
- In case of skin tear:
 - It is important not to remove the skin.
 - Clean wound and remove blood clots/slough/foreign bodies
 - Use simple dressing and try to replace the "skin flap" or piece of skin that was torn
 - Apply a moist wound dressing; a non-adherent wound contact layer, along with bordered foam dressing
 - Consider tetanus prophylaxis

Warning signs that require attention:

- the skin tear is widespread or associated with a full thickness skin injury

- has significant bleeding
- has haematoma formation

Consult medical advice if any of the above. It may require surgical review and intervention to repair the injury.


Skin Tear Prevention Program

Skin Tear Prevention Program helps to lower the risk of skin tear in nursing homes or other care settings.

Components include:

- Assess all older adults on admission for skin tear risk factors
- At risk cases should protect skin: wear sleeves, long pants and long socks
- Shin guards for persons who have skin tears
- Proper skin care and apply moisturizers (emollients) twice a day or as appropriate
- Educate staff on appropriate transfer strategies to avoid skin tears
- Identify environmental causes and cover with protective devices
- Avoid daily bathing and non-emollient soaps

– **End of Chapter 2** –

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References

Fletcher J, Beeckman D, Boyles A et al., (2020). *International Best Practice*

Recommendations: Prevention and management of moisture-associated skin damage (MASD). Wounds International. Retrieved from www.woundsinternational.com

LeBlanc, K., Langemo, D., Woo, K., Campos, H., Santos, V., & Holloway, S. (2019).

Skin tears: Prevention and management. British Journal of Community Nursing, 24(Sup9), S12-S18.

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