Y. Passadorif
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pansement comme celui du médicament doit être le résultat d’une médecine
pansements que sur le développement de nouvelles spécialités ; le choix du
actuellement, la réflexion porte plus sur les modalités d’utilisation des
pansements primaires en dehors des pansements au charbon ne sont pas
destinés à être associé entre eux.
Actuellement, la réflexion porte plus sur les modalités d’utilisation des
pansements que sur le développement de nouvelles spécialités ; le choix du
pansement est précisé.
primaire, si des études sont disponibles le niveau de preuve guidant le choix du
pansement est précisé.

Les pansements primaires en dehors des pansements au charbon ne sont pas
destinés à être associé entre eux.

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CO12-006-f
Prise en charge nutritionnelle des patients neurologiques
à risque ou porteur d’escarre
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English version

CO12-001-e
Predictive risk factors of pressure ulcers: A review of the
literature for the development of French recommendations
for the clinical practice
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Keywords: Pressure ulcers; Risk factors; Predictive risk factors; Risk
assessment; Evidence based medicine
Evaluation of predictive risk factors of pressure ulcers is essential to develop
preventive strategy at the entrance in hospitals and/or nursing homes.
Objective.—The objective is to review the predictive factors of pressure
ulcers in 2012, in particular to determine if the data evolved since the
conference of consensus on the prevention and the treatment of pressure
ulcers of the adult and the old subject (HAS, 2001). The adopted method is a
systematic review of the literature with querying databases Pascal Biomed,
Cochrane Library and PubMed from 2000 to 2010. This review was
followed by a collection of the professional practices with a representative
sample of the participants of the national congresses of PERSE, Sofmer,
SFGG and SFPPC.
Results.—Immobility should be considered as a predictive risk factor of pressure
ulcers (grade B). Undernutrition is possibly a predictive risk factor of pressure
ulcers (grade C).
Discussion.—The management is essential after these factors detected even if
the level of evidence is low. Sensitizing and mobilization of health care teams
requires training in tracking. The risk scales are a decision aid, to always
balance by the clinical judgement of the nursing team.
Conclusion.—There is an interest in knowledge and risk assessment predictive
of ulcers and a support from the hospital admission. Immobility and
undernutrition stay both predictive strong elements, which have to end in a
global evaluation of the risk of pressure ulcers. These predictive risk factors
remain identical to those shown in 2001 at the consensus conference and the
professional practices do not diverge from the recommendations resulting from
the literature.
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CO12-002-e
Support surfaces and pressure ulcers: Review of literature
in order to elaborate French guidelines
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Keywords: Pressure ulcers; Prevention; Treatment; Support surfaces; Based
evidence medicine
The use of support surfaces for the prevention and treatment of pressure ulcers is
considered an important part of at-risk patient care.
However, these devices are very numerous, making the choice difficult for
caregivers.
The aim of this study is to evaluate the effectiveness of support surfaces through
a systematic review of literature.
Literature data are not always relevant and sometimes insufficient for clinicians
to make a choice among available preventive devices. We have to recognize the
methodological limitations of many studies, the lack of interest from industries
in conducting such studies and the relatively small number of trials.
However a few recent meta analyses including critics and guidelines are
available, allowing to summarize the following Grade A guidelines: one
structured foam mattress is more efficient than a standard hospital mattress; one
air alternating pressure mattress is more effective than one viscoelastic mattress
in reducing heel pressure ulcers but pressure ulcers are more severe in air
alternating support; one low-air-loss bed is more efficient than one air mattress
in heel pressure ulcers prevention. One specific sheepskin can reduce sacral
pressure ulcers incidence in orthopaedic patients. One overlay on operating
table reduces per operative and postoperative pressure ulcers.
We have to keep in mind that support surfaces are only a part of pressure ulcers
prevention techniques, which also include nutritional and postural care measures.
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CO12-003-e
Evaluating self-reported pressure ulcer prevention mea-
sures in person with spinal cord injury using the SMnc:
Validation of the French version
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