

# Moisture lesions and incontinence associated dermatitis

Tissue Viability

This information is aimed at those who are at risk of developing a moisture lesion, or have a moisture lesion, and those who are caring for these people.

This leaflet is to help you understand:

- What a moisture lesion is
- How to reduce the risk of developing a moisture lesion
- How to manage and treat a moisture lesion.

This leaflet can be used in conjunction with our Pressure Ulcer patient and carer information leaflet.

## What is a moisture lesion?

A moisture lesion (also described as moisture associated skin damage) is soreness and blistering where the skin has been exposed to wetness over a long period of time. This wetness can be urine, faeces, sweat or wound fluid.

Moisture lesions can vary in size, colour and shape. They often appear as patches of sore skin. The skin sometimes blisters and erosions form. They are often irregular in shape. It is common to find them in the skin folds and creases.

Many moisture lesions are also known as 'incontinence associated dermatitis' and in children as 'nappy rash'.



Mild  
Moisture Lesion



Moderate  
Moisture Lesion



Severe  
Moisture Lesion

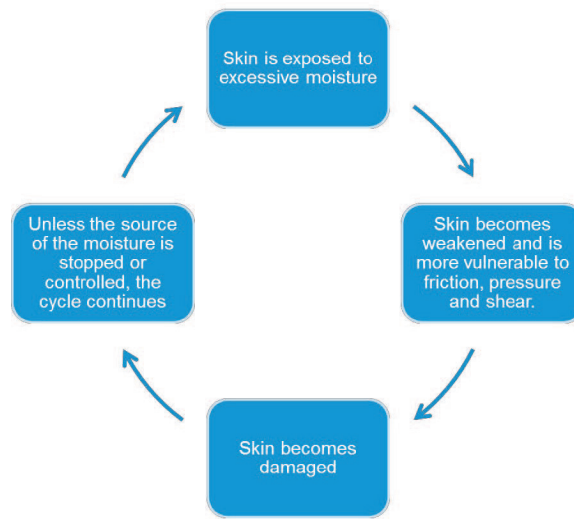
## How do I know if I have a moisture lesion?

One of the first signs that you may have a moisture lesion is a feeling of wetness or irritation on the skin. If you feel wet or sore, it is important to let your nurse or carer know, especially if you need assistance with personal care.

The longer the skin is exposed to moisture, the more damaging it will be. It is important to keep the skin clean and dry to reduce the risk of developing a moisture lesion.

**The prevention of infection is a major priority in all healthcare and everyone has a part to play.**

- Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available
- If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice from 111
- Keep the environment clean and tidy
- Let's work together to keep infections out of our hospitals and care homes.



## What are the risks of developing a moisture lesion?

**Pain:** Moisture lesions can be very painful because they are shallow wounds and nerve endings are exposed. However they are a minor skin condition and with good management and treatment, should heal within 1-2 weeks.

**Infection:** Moisture lesions can increase the risk of infection. When moisture contains an irritant, like urine, faeces or sweat, it can damage the structure and function of the skin. The pH (a scale of acidity) of urine and faeces is different to the pH of the skin. When skin is exposed to an irritant for a prolonged period of time, skin will weaken and become vulnerable to break down and will increase the risk of infection. When skin is exposed to urine for a prolonged period of time skin is weakened and some bacterial defences are reduced. Bacteria also thrive in a warm and moist environment, so it is important to ensure the skin is clean and dry to reduce the risk of infection.

**Pressure Ulcers:** Having a moisture lesion can increase the risk of you developing a pressure ulcer. Also known as 'bed sores', pressure ulcers are areas of localised skin damage. They can occur anywhere on the body, but tend to occur on bony areas. The most common sites for pressure ulcer development are the bottom, hips, and the heels and elbows.

## What causes a moisture lesion?

A moisture lesion is caused by exposure to excessive moisture for a long period of time. The four main causes are urinary incontinence, faecal incontinence, leaking wounds and excessive sweating.

**Urinary incontinence** is an involuntary passing of urine, meaning you pass urine when you do not mean to.

**Faecal incontinence** is an involuntary passing of faeces, meaning you pass faeces when you do not mean to.

**Leaky wounds** can cause maceration (moisture damage) to the surrounding skin of the wound.

**Excessive sweating** can lead to a build up of moisture in the folds and creases of the skin.

## How do I prevent a moisture lesion developing?

### Managing Conditions

To prevent moisture lesions from developing, the condition that is causing the excessive moisture needs to be managed appropriately. Incontinence is always a symptom of an underlying problem and patients should be assessed and treated where possible. Effectively managing incontinence or sweat is really important. A regular toileting regime is advised to prevent incontinence. In some cases you might have a continence pad prescribed to ensure you have a pad suitable for your needs. You must only use one pad at a time and apply as directed by the health care professional. If you have sudden changes in your bowel habits, please contact a health care professional.

To prevent sweat associated skin damage, it is important to wear light breathable clothing.

For more information and advice about how to manage any of these conditions, speak to your healthcare professional.

## How do I prevent a moisture lesion developing?

### Good Skin Care

Moisture lesions can be prevented through good skin care.

There are four key steps to maintaining good skin care.

- **Cleanse:** Wash vulnerable skin with either water or a moisturising cream suitable as a soap substitute. Some soaps can be very harsh to skin and affect the lower pH levels of the skin
- **Dry:** Dry skin with a gentle rubbing method. Pat drying has been found not to be effective. If skin is left moist, it is more vulnerable to damage. Talcum powder should not be used. Ensure you dry well between skin folds e.g. between buttocks, groins.
- **Moisturise:** Moisturise skin with an emollient (moisturising product), to help the skin stay supple and hydrated
- **Protect:** You may be prescribed a product that protects your skin, e.g, Medihoney barrier cream, Mediderma S, or Cavilon, depending on your local formulary. It is important you do not use an oil based product if you use a continence pad, as the oils will affect the absorbency of the pad (e.g sudocrem, Metanium or Conotrane).

Whilst you are in hospital, we will provide an appropriate barrier product to be used. This treatment can be continued at home.

If the sore area becomes smelly, this might be an indication of a fungal infection or an infection has developed. You must contact your health care professional for further advice.

## Good Nutrition and Hydration

Maintaining a healthy weight and good fluid intake helps to maintain good skin integrity. This can be achieved by eating a balanced diet and keeping hydrated.

Poor nutrition and dehydration greatly impacts all wound healing by hindering tissue and skin repair.

If you notice you are eating and drinking less than you normally would, please inform your health care professional. You may need to be seen by a dietician and have extra nutritional supplements.

## What do I need to do if I have a moisture lesion?

### Manage the moisture

Managing the source of moisture is very important to allow the damaged skin to heal. If damaged skin is continually exposed to moisture, the damage is likely to get worse.

### Good skin care

Follow the good skin care advice on the previous page. Cleanse, Dry, Moisturise and Protect.

### Protect

Whilst you are in hospital we may use a barrier cream and/or a barrier film to protect your skin and wound from excessive moisture.

### Effective repositioning

If you have a moisture lesion you will be more at risk of developing a pressure ulcer so you will be started on a repositioning regime, so you are not in the same position too long. You may find it frustrating to be turned and stood on a regular basis, but this is to protect your skin.

This regime can be discussed with your health care professional. Please see the Pressure Ulcer patient information leaflet for more advice.

### Absorbent dressings

To manage very leaky wounds, a barrier film can be used alongside a highly absorbent wound dressing or wound manager bag to control the high volumes of wound fluid.

## Tissue Viability Team

The tissue viability team consist of specialist nurses. The team teach a range of health care professional to help prevent moisture lesions. They will refer you to the team if your wound is difficult to manage.

## Feedback

We appreciate and encourage feedback. If you need advice or are concerned about any aspect of care or treatment please speak to a member of staff or contact the Patient Advice and Liaison Service (PALS).

**Tel: 01902 307999 ext. 85368 / 85362**

**Mobile: 07880601085**

**Email is: [rwh-tr.pals@nhs.net](mailto:rwh-tr.pals@nhs.net)**

## English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

## Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

## Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

## Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

## Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

## Traditional Chinese

如果您需要以其他方式了解信息，如易读或其他语种，请告诉我们。

如果您需要口译人员或帮助，请告诉我们。