The unfavorable effects of repositioning due to dynamic force should be noticed and reformed in the repositioning and nursing care of pressure ulcers

The positive effects of repositioning are already widely recognized. However, repositioning also carries unfavorable effects due to dynamic force at repositioning. These effects which produce bleeding, superficial necrosis of granulation tissue, external force depression (EF-Dp), and undermining (EF-Un) are generally unknown. The cause of the particular wound changes above in pressure ulcers are a result of the dynamic action of repositioning and diaper changing which directly cause wound deformities and also indirectly by creating dynamic forces which let the soft tissue around the wound tangentially move into the wound pressing and rubbing the granulation tissue in the wound. Also, the reason why pressure ulcers belong to the category of incurable chronic ulcers is that the delayed wound healing is clearly caused by repositioning which hinders wound healing. The particular symptoms in pressure ulcers are produced by the interactive abrasion and the frequent rubbing between the wound bed and the surrounding tissue which leaves the clues after forces loading in the histology of pressure ulcers.

Innovation of repositioning
Two ways to improve repositioning.

1. Use of transpositioning gloves and a sliding sheet, thus decreasing shear force and removing residual force in the wound at repositioning.
   Advantages;
   i. Reduction of negative influence to the wound, ii. Patient comfort, iii. Reduction in caregiver back pain.
2. Use of a high functioning automatic repositioning mattress which adjusts to the varying body parts of the patient.
   Advantages;

Biography
Takehiko Ohura completed his MD in 1957 from Hokkaido University and also gained his PhD there in 1962. He was a Professor of Plastic Reconstructive Surgery and was Chair of Burn Unit in Hokkaido University Hospital. Until 1978, he was the President of Hokkaido University Hospital. After he retired, he became President of Kejin-kai Medical Corporation, which has 2,000 beds in long term care hospitals. He is presently the Chair of Pressure Ulcer & Wound Healing Research Center (Kojin-kai). He is currently Secretary General of the Japanese Association of Homecare for Pressure Ulcers and Wounds. He is also Secretary General of the Japanese Society of Limb Salvage & Podiatric Medicine after founding the society in 2009. He has published over 100 papers regarding pressure ulcers and leg ulcers in Japanese journals and 15 papers in English journals worldwide.

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