

CONFERENCE ABSTRACT

Pressure Injury Prevalence in Intensive Care Versus Acute General Patients: A 5-Year Analysis

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Background: ICU patients have multiple risk factors and are vulnerable to pressure injury. Previous studies have shown that pressure injury prevalence and incidence are high in ICU compared to non-ICU samples. However, few studies report mucosal injuries, and many exclude Stage 1 pressure injuries, making benchmarking difficult.

Aim: To analyse state-wide prevalence of hospital-acquired pressure injury (HAPI) in ICU versus non-ICU patients.

Method: Secondary data analysis of five state-wide annual point-prevalence studies between 2015 to 2019. Sample: N = 15678, ICU n = 611.

Results: ICU HAPI prevalence = 9.6% (non-ICU = 2.1%; $p < .001$); \geq Stage II ICU HAPI prevalence = 8.6% (non-ICU = 1.2%; $p < .001$); ICU patients 5 times greater likelihood to have a HAPI than non-ICU patients; ICU patients 7 times greater likelihood to have a \geq Stage 2 HAPI than non-ICU patients. The proportion of 'severe' HAPIs (Stages III-IV and SDTI) in ICU (27.9%) was greater than non-ICU participants (14.4%); $p = .004$. The largest proportions of ICU HAPIs were on the sacrum/coccyx (20.9%) or heel (16.3%) and there was a significantly greater proportion of hospital-acquired mucosal injuries in ICU patients (1.6% versus 0.1%).

Conclusions: The difference in HAPI prevalence between ICU and non-ICU patients was statistically and clinically significant. The relatively high prevalence of HAPI in ICU indicates that despite heightened awareness of prevention in ICU, they remain a significant clinical problem. Although prevalence was high in this Australian study, it compares favourably with other recent global studies. These results may be used for national and benchmarking.