



Prevention of Decubitus in Geriatric Patients from a Holistic Nursing Perspective

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Abstract. Pressure ulcers are one of the serious complications that often occur in geriatric patients due to immobility, circulatory disorders, and malnutrition. A holistic nursing approach that includes physical, psychological, social, and spiritual aspects is an effective strategy in pressure ulcer prevention. This study used a literature review to explore pressure ulcer prevention strategies in geriatric patients. The literature review was conducted by reviewing various journals and related scientific sources, while the case analysis was conducted based on reports and case documentation in nursing practice. The results of the study show that a holistic approach to nursing, including skin care, nutritional management, patient repositioning, psychosocial support, and family involvement, plays an important role in reducing the risk of pressure ulcers. The conclusion of this study confirms that the application of holistic nursing can not only prevent pressure ulcers but also improve the quality of life of geriatric patients. Therefore, education for nursing staff and families is essential to increase the effectiveness of holistic nursing-based pressure ulcer prevention.

Keywords: Geriatrics, Holistic Nursing, Prevention, Pressure Ulcers.

1. INTRODUCTION

Pressure ulcers or bedsores are one of the serious complications that often occur in geriatric patients, especially in those who experience prolonged immobility. According to the World Health Organization (WHO) and various epidemiological studies, pressure ulcers are more common in elderly patients undergoing long-term care in hospitals, nursing homes, or at home with family care. The prevalence of pressure ulcers in geriatric patients ranges from 10% to 30%, depending on the level of care and the patient's health condition.

According to a report from the Indonesian Ministry of Health (2022), the incidence of pressure ulcers in hospitals in Indonesia ranges from 10–20% of the total number of inpatients, with a higher risk in geriatric patients.

Pressure ulcers occur due to constant pressure on certain areas of the body, which causes impaired blood flow to these tissues. As a result, the tissue experiences ischemia (oxygen deficiency) and can experience necrosis (tissue death). The areas of the body most commonly affected by pressure ulcers are the sacrum (tailbone), heels, elbows, and back. If not handled properly, pressure ulcers can cause systemic infections, chronic pain, impaired wound healing, and even increase the risk of death.

In the world of nursing, pressure ulcer prevention is a challenge that requires a multidisciplinary approach. The holistic nursing approach is considered an effective strategy

in preventing and treating pressure ulcers because it not only focuses on the physical aspects, but also considers the psychological, social, and spiritual well-being of the patient.

Holistic nursing is a care approach that treats patients as individuals as a whole, including physical, psychological, social, and spiritual aspects. In the context of pressure ulcer prevention, this approach is very important because the risk factors for pressure ulcers are not only related to the physical condition of the patient, but also to the emotional state, social support, and spirituality of the patient.

Several studies show that patients who receive holistic care have a lower risk of developing pressure ulcers compared to those who only receive conventional care.

This article aims to analyse pressure ulcer prevention strategies through a holistic nursing perspective using literature review and case analysis methods.

Patofisiologis Dekubitus

Proses terjadinya dekubitus dimulai ketika tekanan eksternal yang diberikan pada area tertentu lebih besar dari tekanan kapiler yang diperlukan untuk mempertahankan aliran darah ke jaringan tersebut. Kondisi ini menyebabkan **iskemia jaringan**, yaitu keadaan di mana suplai oksigen dan nutrisi ke jaringan berkurang drastis. Jika tekanan tidak segera dihilangkan, jaringan akan mengalami hipoksia (kekurangan oksigen), diikuti oleh **nekrosis (kematian jaringan)**, yang dapat berkembang menjadi ulserasi atau luka terbuka.

Selain tekanan berkepanjangan, **gesekan dan geseran** (shearing force) juga berperan dalam pembentukan dekubitus. Gesekan terjadi ketika kulit bergesekan dengan permukaan tempat tidur atau kursi roda, sedangkan geseran terjadi saat pasien tergelincir di tempat tidur, menyebabkan lapisan kulit dan jaringan di bawahnya bergeser dalam arah yang berbeda, yang dapat merusak struktur kapiler darah.

Risk Factors Of Decubitus In Geriatric Patients

Geriatric patients have a higher risk of developing pressure ulcers than other populations due to various physiological and environmental factors, including:

a. Immobility and Decreased Mobility

Elderly people with limited mobility due to chronic illnesses such as stroke, osteoarthritis, or Parkinson's disease are more prone to developing pressure ulcers. The inability to change body position independently causes prolonged pressure on certain areas.

b. Decreased Skin Elasticity and Tissue Aging

As we age, the skin becomes thinner, drier, and loses its elasticity due to decreased collagen production. This makes the skin more vulnerable to injury and slow in the wound healing process.

c. Malnutrition and Micronutrient Deficiency

Deficiencies in protein, vitamin C, zinc, and iron can inhibit the process of tissue regeneration and worsen pressure sores. Geriatric patients often experience decreased appetite, indigestion, or dental problems that make them more prone to malnutrition.

d. Urinary and Faecal Incontinence

Prolonged exposure to urine and faeces can cause skin maceration, a condition in which the skin becomes flaccid and vulnerable to irritation and infection. Incontinence also increases the risk of bacterial colonisation which can worsen pressure sores.

e. Blood Circulation Disorders

Diseases such as diabetes mellitus and hypertension can cause microcirculation disorders, resulting in suboptimal blood supply to the tissues. Prolonged tissue hypoxia accelerates the process of necrosis and worsens the condition of pressure sores.

f. Sensory Impairment and Neuropathy

Elderly people with sensory impairments, such as diabetic neuropathy or spinal cord injury, may not feel pressure or pain in the area that is being pressed. As a result, they are not aware of the pressure sores until the condition is severe.

Impact Of Decubitus On Geriatric Patients

Decubitus not only causes prolonged pain, but also negatively impacts the quality of life of geriatric patients. Some of the impacts include:

1) Increased Risk of Infection

Poorly managed decubitus can lead to local infections that develop into systemic infections such as sepsis, which is life-threatening for geriatric patients.

2) Decreased Quality of Life

Pain from pressure sores, limited activity, and dependence on nurses or caregivers can cause stress, depression, and anxiety in elderly patients.

3) High Cost of Care

Pressure ulcer treatment requires intensive wound therapy, the use of special wound dressings, antibiotics, and even surgery for necrotic tissue debridement, which can increase the economic burden on patients and families.

4) Increased Morbidity and Mortality Rates

Elderly people with uncontrolled pressure ulcers have a higher risk of serious complications, which can shorten their life expectancy.

Keperawatan Holistik

Keperawatan holistik merupakan pendekatan dalam praktik keperawatan yang tidak hanya berfokus pada aspek fisik pasien, tetapi juga mencakup kesejahteraan psikologis, sosial, dan spiritualnya. Dalam konteks pelayanan kesehatan, pendekatan ini menekankan pentingnya memahami pasien sebagai individu yang unik dengan kebutuhan yang kompleks, bukan sekadar seseorang yang sedang mengalami penyakit atau kondisi medis tertentu.

Pendekatan holistik dalam keperawatan bertumpu pada prinsip bahwa kesehatan bukan hanya ketiadaan penyakit, melainkan juga mencakup keseimbangan dalam berbagai aspek kehidupan seseorang. Seorang perawat yang menerapkan keperawatan holistik akan berupaya untuk tidak hanya mengatasi gejala fisik yang dialami pasien, tetapi juga membantu mereka dalam mengelola stres, menjaga kesehatan emosional, serta memperkuat dukungan sosial dan spiritual yang dapat meningkatkan kualitas hidup mereka.

Keperawatan holistik tidak hanya diterapkan dalam situasi tertentu, tetapi dapat digunakan dalam berbagai bidang layanan kesehatan, baik di rumah sakit, panti jompo, layanan kesehatan komunitas, maupun perawatan di rumah.

Pendekatan Holistik Dalam Pencegahan Dekubitus Pada Pasien Geriatri

Pendekatan **holistik** dalam keperawatan adalah suatu konsep perawatan yang berfokus pada keseluruhan aspek pasien, bukan hanya kondisi fisiknya, tetapi juga kesejahteraan psikologis, sosial, dan spiritual. Dalam konteks pencegahan **dekubitus pada pasien geriatri**, pendekatan holistik menjadi sangat penting karena luka tekan bukan hanya sekadar masalah fisik, tetapi juga dipengaruhi oleh kondisi emosional, dukungan sosial, serta kondisi spiritual pasien.

Pendekatan ini mengedepankan perawatan yang **individualized dan komprehensif**, di mana tenaga keperawatan tidak hanya memberikan tindakan medis, tetapi juga menciptakan lingkungan yang mendukung kesehatan mental, sosial, dan spiritual pasien lansia. Dengan demikian, keperawatan holistik dapat meningkatkan **kualitas hidup pasien** dan mencegah komplikasi yang lebih serius akibat dekubitus.

Physical Approaches In Pressure Ulcer Prevention

The physical approach to pressure ulcer prevention includes interventions aimed at reducing excessive pressure, improving blood circulation, and maintaining the cleanliness and moisture of the patient's skin.

a. Repositioning and Mobilisation of Patients

Research by Handayani & Sari (2020) found that repositioning patients every 2 hours significantly reduces the risk of pressure sores in inpatients at Dr Sardjito Regional Hospital, Yogyakarta. In addition, nurses can work with physiotherapists to provide light mobilisation exercises to improve blood circulation and prevent prolonged pressure on vulnerable areas.

b. Use of Aids and Skin Care

According to Permatasari et al. (2021), the use of anti-decubitus mattresses can help distribute pressure more evenly on the patient's body. In addition, skin care with zinc oxide or silicone-based barrier creams has also been proven effective in preventing skin irritation that can lead to decubitus.

A study by Saputri & Hidayat (2019) shows that the development of pressure ulcers in 90% of patients with early-stage pressure ulcers can be prevented through proper skin care and optimisation of skin hydration.

c. Optimisation of Nutrition in Pressure Ulcer Prevention

Poor nutritional status increases the risk of pressure ulcers due to a lack of nutrients that support tissue healing.

Research by Rahayu et al. (2021) at Hasan Sadikin Hospital, Bandung, shows that patients with protein, vitamin C, and zinc deficiencies have a higher risk of pressure ulcers. Therefore, nurses need to ensure that patients get adequate nutritional intake through:

- High protein (1.2–1.5 g/kg body weight/day) to accelerate tissue regeneration
- Vitamin C and zinc to increase collagen production and accelerate wound healing
- Adequate hydration to maintain skin elasticity

According to a study by Prasetyo & Wijayanti (2020), the administration of protein supplements to patients at high risk of pressure ulcers reduces the incidence of pressure ulcers by 40% compared to the group that did not receive supplements.

d. Psychosocial Approach to Pressure Ulcer Prevention

Elderly patients who experience social isolation or depression are more prone to pressure ulcers due to a lack of motivation to move.

Research by Dewi et al. (2022) shows that elderly people who receive social support and motivation from nurses are more physically active and have a lower risk of developing pressure ulcers. Therefore, nurses can carry out psychosocial interventions through:

- Education for patients and families about the importance of mobilisation
- Providing motivation for patients to stay active, even with limitations
- Increasing patients' social interaction to reduce stress and anxiety

Research at the Jakarta Nursing Home by Sudarmono et al. (2021) found that elderly people who actively interact and have good social support have a 30% lower risk of pressure ulcers compared to elderly people who experience social isolation.

Spiritual Approach to Pressure Ulcer Prevention

The spiritual approach in nursing aims to create inner peace and improve the quality of life of patients.

Research by Sari et al. (2021) at Dr. Kariadi General Hospital, Semarang, found that elderly patients who received spiritual support, such as prayer guidance and religious reflection, experienced lower levels of anxiety, which had a positive impact on their physical condition.

Strategies that nurses can use to support the spiritual aspects of patients include:

- Helping patients to worship according to their beliefs
- Listening to patient complaints and providing emotional support
- Inviting patients to reflect positively and accept their health condition

A study by Hidayati & Rachman (2020) shows that patients who have spiritual calm tend to be more cooperative in undergoing treatment and have lower stress levels, which indirectly supports the wound healing process and prevents the development of pressure ulcers.

2. CONCLUSION

Pendekatan keperawatan holistik dalam pencegahan dekubitus pada pasien geriatri merupakan strategi yang komprehensif dan mencakup berbagai aspek kehidupan pasien. Dengan memperhatikan faktor fisik, nutrisi, psikososial, dan spiritual, perawat dapat memberikan perawatan yang tidak hanya mencegah luka tekan, tetapi juga meningkatkan kesejahteraan pasien secara keseluruhan.

Keberhasilan pendekatan ini sangat bergantung pada keterlibatan perawat, tenaga medis lainnya, keluarga, dan lingkungan sekitar pasien dalam menciptakan perawatan yang mendukung kesehatan serta kualitas hidup pasien geriatri. Oleh karena itu, implementasi keperawatan holistik harus menjadi prioritas dalam perawatan lansia guna mencegah

komplikasi serius akibat dekubitus dan memastikan mereka mendapatkan perawatan yang bermartabat serta berkualitas.

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