

SKIN ASSESSMENT -

IN THE NEWBORN INFANT

NIPIRA Study



August, D L
PhD Candidate
NNCA, October 2016
The Townsville Hospital and Health Service

ACKNOWLEDGMENTS



Patients/Families, Neonatal Unit Staff, Health & Wellbeing Service Group

FUNDING

- Mona Kendall Association
- Parker Health Care & Australian College of Neonatal Nurses
- The Townsville Research Trust Fund
- Graduate Research School of James Cook University



Karen New, Robin Ray, Yoga Kandasamy & Liza Edmonds





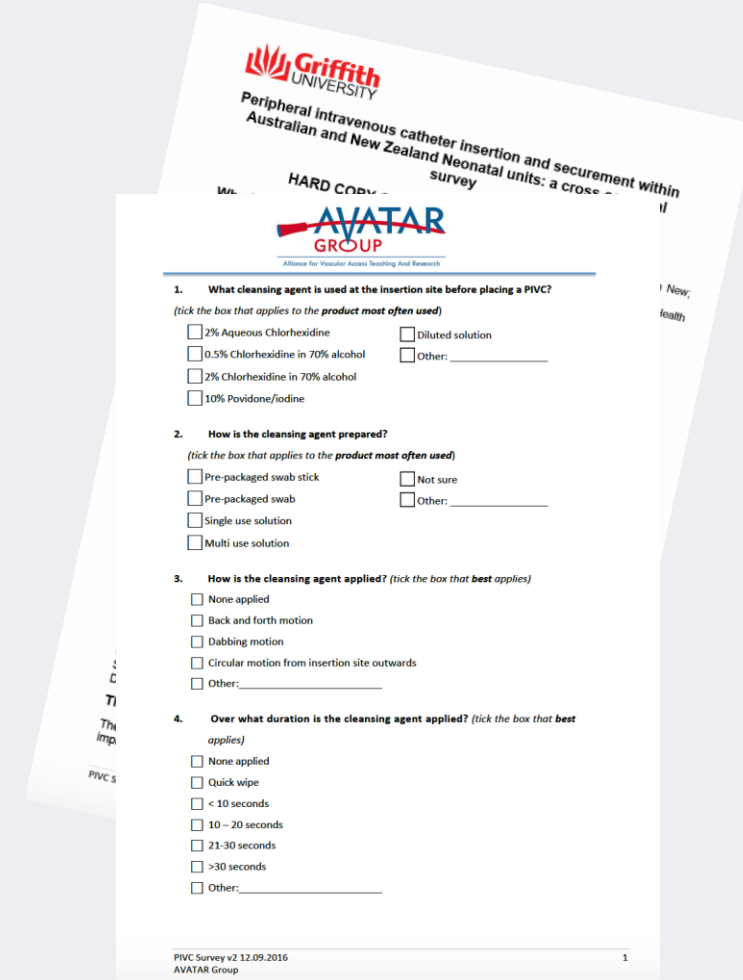
Peripheral intravenous catheter insertion & securement within Australian & New Zealand neonatal units: a cross-sectional survey.

Red Envelope or Registration Desk :

Your name

& Phone number

Prize drawn
28th of October.



Neonate/newborn outcomes

Measurements of skin health

Objectives



NEONATAL SKIN RISK ASSESSMENT SCALE (NSRAS)

	4. Gestational age < 28 weeks	3. Gestational age > 28 weeks but < 33 weeks	2. Gestational age > 33 weeks but < 38 weeks	1. Gestational age > 38 weeks to postterm	Score
General Physical Condition	4. Completely limited Unresponsive (does not flinch, grasp, moan, increase blood pressure, or heart rate) to painful stimuli due to diminished level of consciousness or sedation.	3. Very limited Responds only to painful stimuli (flinches, grasps, moans, increased blood pressure or heart rate).	2. Slightly limited Lethargic.	1. No impairment Alert and active.	
Mental Status	4. Completely immobile Does not make even slight changes in body or extremity position without assistance (e.g., Pavulon).	3. Very limited Makes occasional slight changes in body or extremity but unable to make frequent changes independently.	2. Slightly limited Makes frequent though slight changes in body or extremity position independently.	1. No limitations Makes major and frequent changes in position without assistance (e.g., turn head).	
Mobility	4. Completely bed-bound In a radiant warmer with a clear plastic "saran" tent.	3. Limited bed-bound In a radiant warmer without a clear plastic "saran" tent.	2. Slightly limited In a double walled isolette.	1. Unlimited In an open crib.	
Activity	4. Very poor NPO on intravenous fluids.	3. Inadequate Receives less than optimum amount of liquid diet for growth (formula/breast milk) and supplemented with intravenous fluids.	2. Adequate Is on tube feeding; every 2-3 hours meet nutritional needs for growth.	1. Excellent Bottle/breastfeeds every 2-3 hours; meets nutritional needs for growth.	
Nutrition	4. Constantly moist Skin is moist/damp every time infant is moved or turned.	3. Moist Skin is often but not always moist/damp; linen must be changed at least once a shift.	2. Occasionally moist Skin is occasionally moist/damp. Requiring an extra linen change approximately once a day.	1. Rarely moist Skin is usually dry; linen requires changing only every 24 hours.	
Moisture	If score ≥ 13 begin infant on Standard of Care of Neonate at risk for skin injury.				

THE GOAL



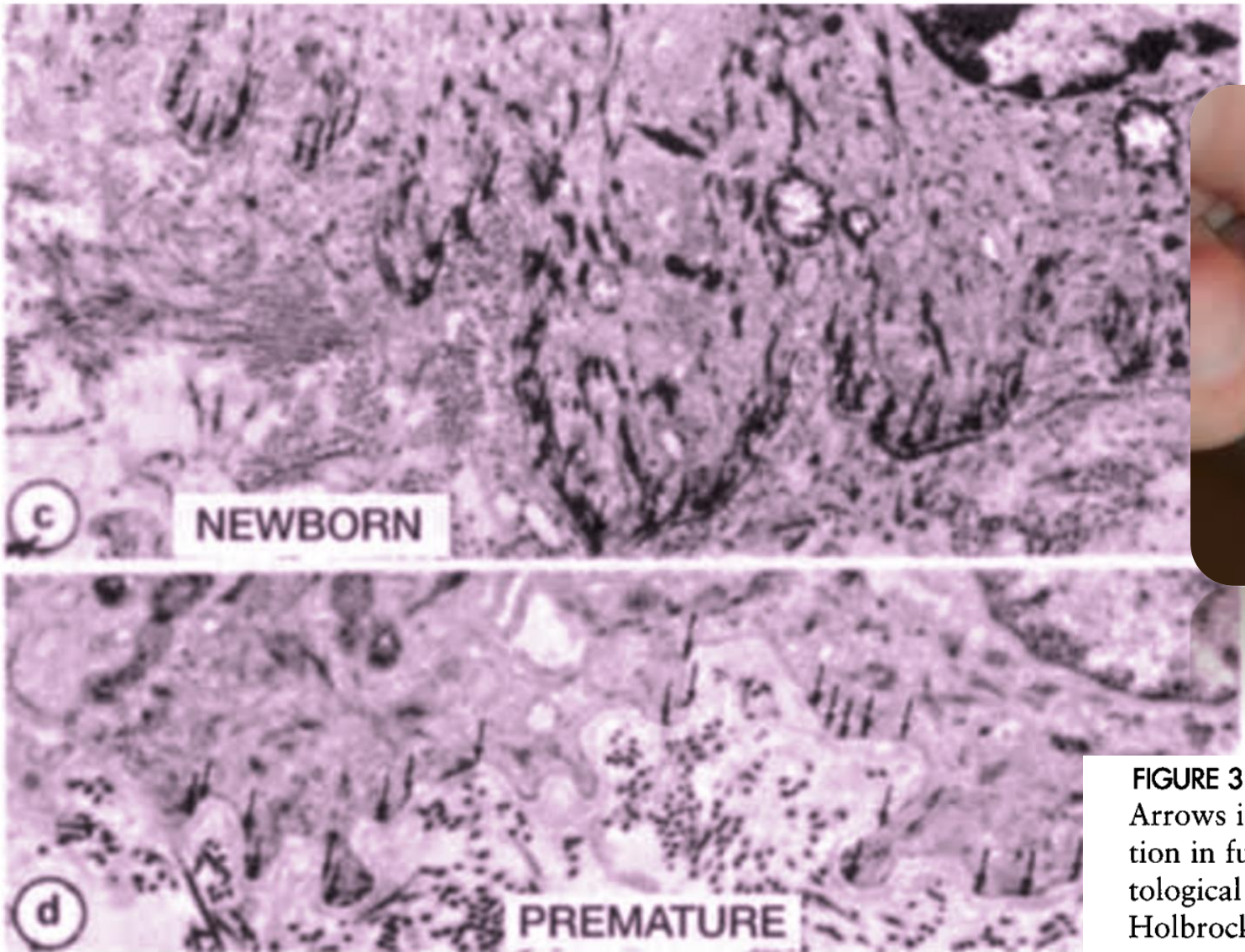
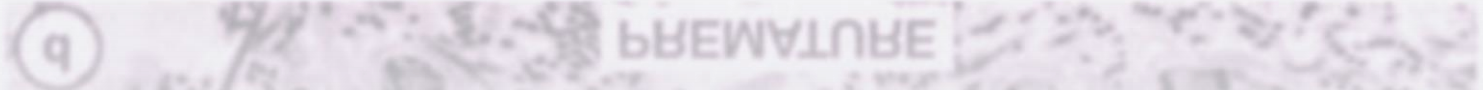


FIGURE 3
Arrows indicate anchoring fibrils at dermo-epidermal junction in full-term and premature infants. Note. From "A Histological Comparison of Infant and Adult Skin," by K. A. Holbrock, 1982. In *Neonatal Skin, Structure and Function*, H. I. Maibach and E. K. Boisits (editors) (p. 12). Reprinted courtesy of Marcel Dekker, Inc.





Kidneys

- Creatinine
- Urine output

Lungs

- Minute/Tidal volumes
- Oxygenation

Heart

- Heart rate, Perfusion
- Echocardiogram, Electrocardiogram

Skin

- Visual assessment
- Trans Epidermal Water Loss, pH

HEALTH, FUNCTIONALITY & MATURITY

Skin

● TEWL-Trans Epidermal Water Loss

● Visual assessment



TEWL

Hey, Wu, Farnroff (1970)

Rutter and Hull (1979)

- g/m² of water loss various gestational ages
- 4hours, 4 days, 3 weeks of life
- 18 anatomical sites
 - Abdomen highest water loss <30 weeks
- Thermoregulation & volume of fluid losses

Harpin & Rutter (1983), Kalia et al. (1998)

- TEWL, term ≤ adult → mature

Lund & Kuller (1997)

- Tape removal sites
 - ↑ TEWL (pectin & plastic)



Skin health

Hoeger et al. (2002)

- pH, skin desquamation, stratum corneum hydration, surface texture (n=202, term)
- 3 day, 4 weeks, 12 weeks , 4 anatomical sites
- Differences in skin apparent in first 3 months

Nikolovski & Stamatas (2008)

- 124 infants (3-12 months)
- water holding properties & transport differed

Fluhr et al. (2010)

- Doppler measure for perfusion
- TEWL term \neq preterm \neq < 25 weeks
 - < 25 weeks (longer development)
- (2014) electron microscope
 - Low surface acid \rightarrow \downarrow stratum corneum cohesion

Skin

- TEWL, pH
- Visual assessment

Lund et al. (2001, 2004)

NSCS – Neonatal Skin Condition Score
Lund et al. (1986)

Dryness-

- 1- normal, no dry skin
- 2- dry skin, visible scaling
- 3- very dry, cracking/fissures

Erythema

- 1- no erythema
- 2- visible erythema < 50% of body surface
- 3- visible erythema > 50% of body surface

Breakdown/excoriation

- 1- none evident
- 2- small localized areas
- 3- extensive

Perfect score = 3, worst score =9

68.7%-85.4% (intrarater) and 65.9%- 89% (interrater)



Skin

TEWL

Visual assessment



Dryness

Score	Description	Area
0	None	---
0.5	Slight powderiness	< 10%
1.0	Slight powderiness or early cracking	10-50% < 10%
1.5	Slight powderiness or early cracking	>50% 10-50%
2.0	Early cracking or moderate cracking & scales	> 50% < 10%
2.5	Moderate cracking & scales	10-50%
3.0	Moderate cracking & scales	>50%
3.5	High cracking & lifting scales	10-50%
4.0	High cracking & lifting scales	>50%
4.5	Bleeding cracks	10-50%
5.0	Bleeding cracks	>50%

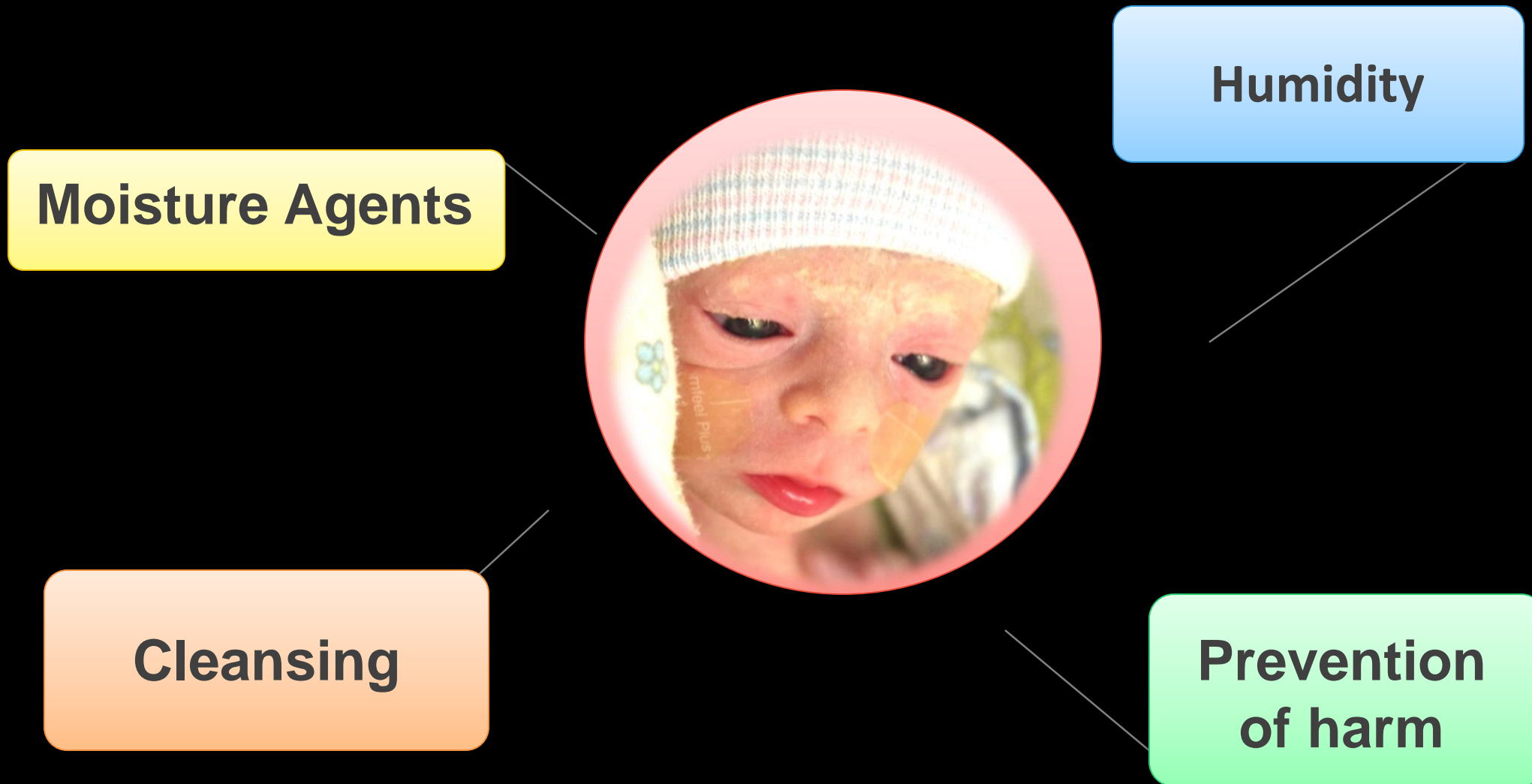
Rash

red
 altered, over ≥1
 10-50%
 > 50%
 us
 eas, numerous,
 Children's Hospital

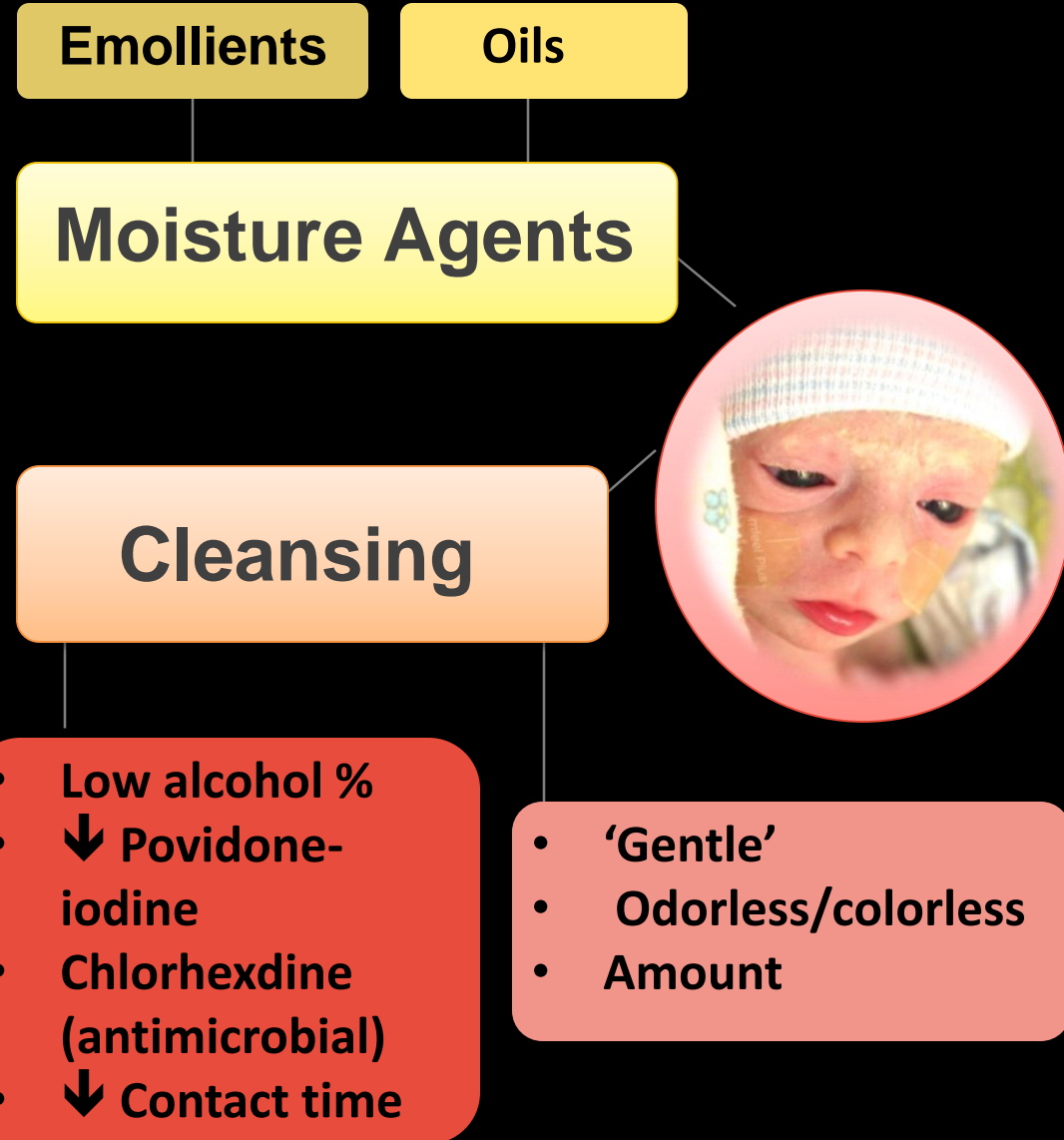
© 2011 Cincinnati Children's Hospital Medical Center

Visscher M. A Practical Method for Rapid Measurement of Skin Condition. *Newborn and Infant Nursing Reviews*. 12//2014;14(4):147-152.

SKIN INTEGRITY INTERVENTIONS

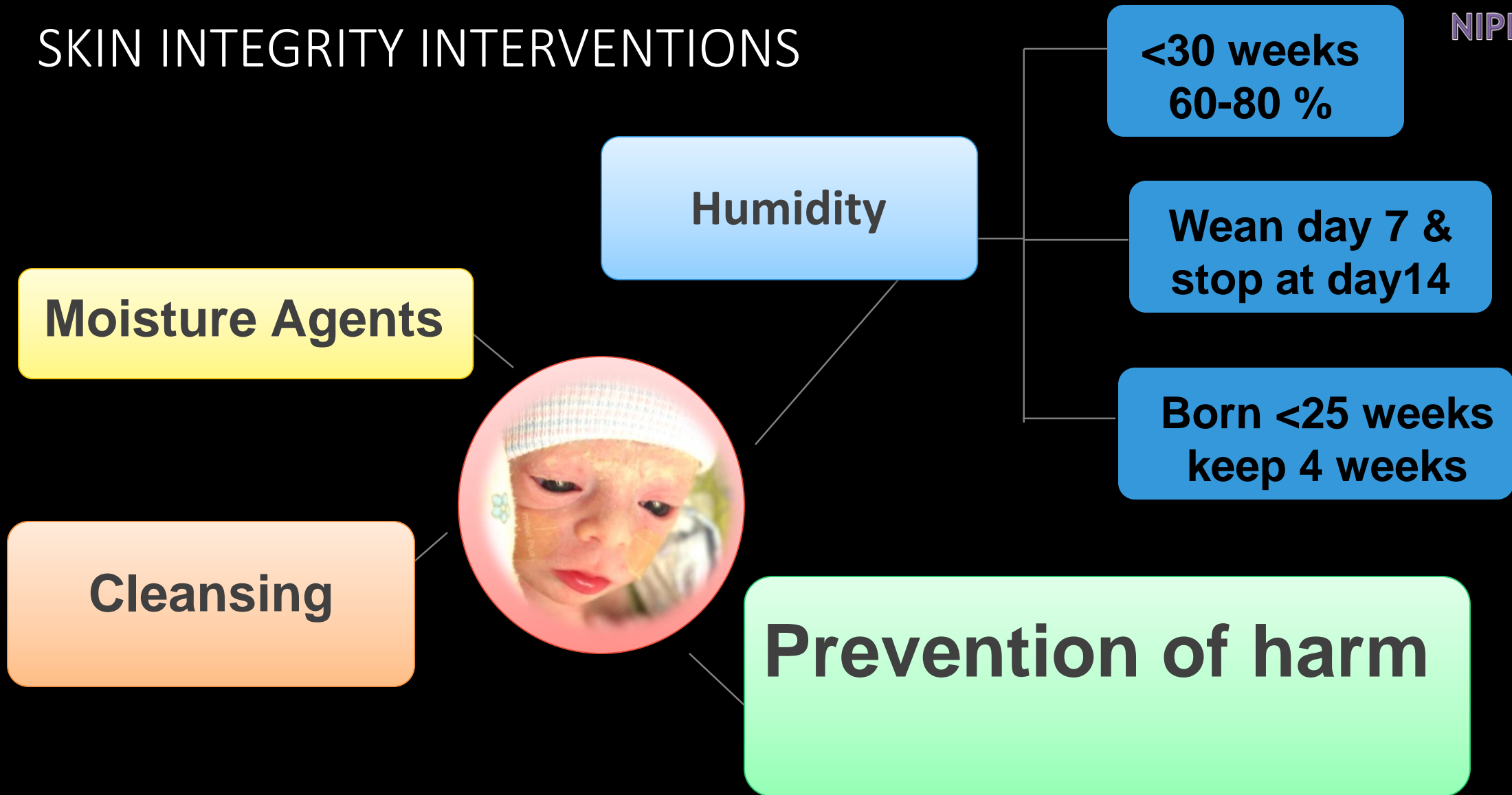


SKIN INTEGRITY INTERVENTIONS



NIPIRA Study	
Darmstadt et al. (2005) Lund et al. (2001)	
Prospective evaluation of skin care bundle & outcomes Aquaphor ↔ Sunflower seed oil	Bangladesh
• Nosocomial infection	
• No increased rates of infection	
Cooke (2011)	
Conner et al. (2003)- Cochrane Review	
Infant Massage & Oil for skin care	UK
Ointment & Emollients for preterm skin	
• (2014) Protocol for trial >37 weeks	
• Aquaphor and Eucerin	
Danby et al. (2013)	
• Paraffin - TEWL	
• Skin conditions improved (TEWL)	
Olive oil ↔ Sunflower seed oil	UK
• Coagulase Negative Staph increased	
• Adults, 4 weeks	
• TEWL loss = tape stripping	
• ↓ Stratum C. thickness	
Salam et al. (2015) RCT	
Nangia et al. (2015) RCT	
Coconut oil and control for colonization	Pakistan India
• 751gm- 1499g	
• TEWL, skin swabs, skin condition score without ↑ infection	

SKIN INTEGRITY INTERVENTIONS





Dermatologic

Collodion

Infection
Scalded Skin

Genetic
Epidermolysis bullosa

Benign
Erythema Toxicum



Tatrogenic

Pressure

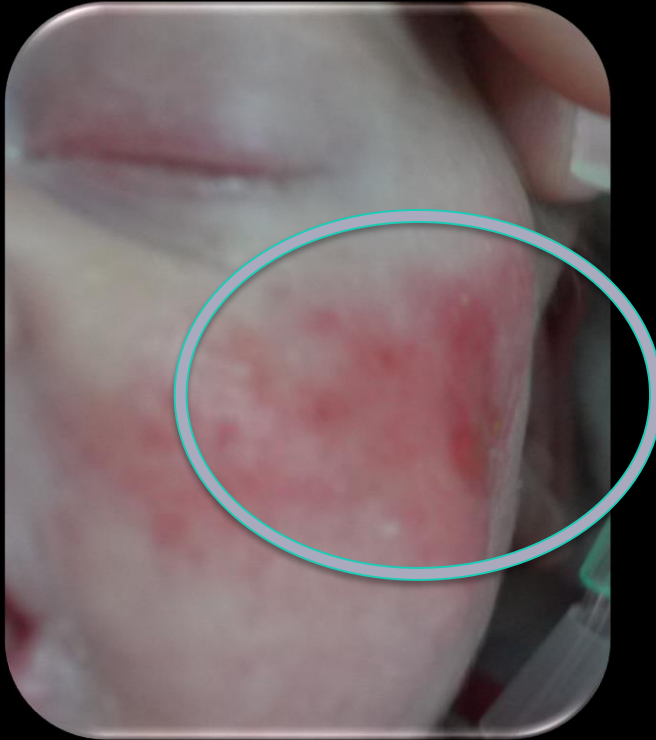
Epidermal
Stripping

Dermatitis

Burn

Extravasation

Delivery/Birth
Injuries

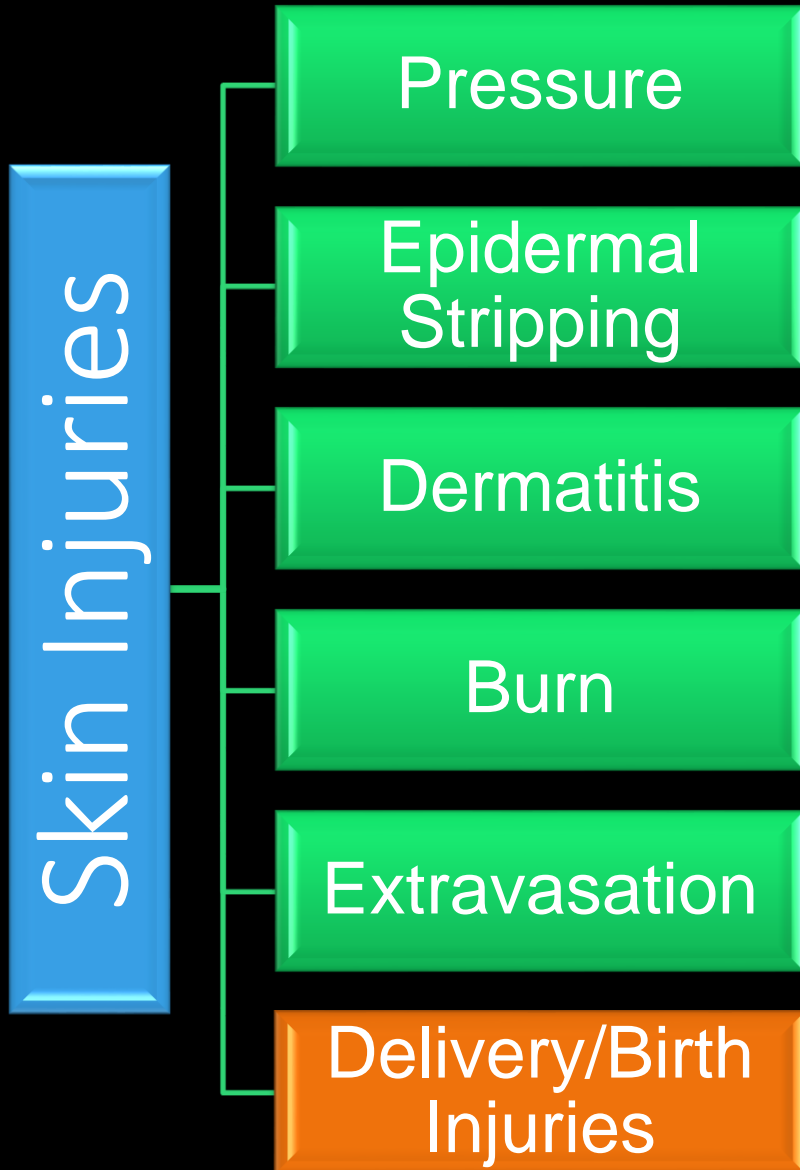


Frequency & Severity

DEPTH



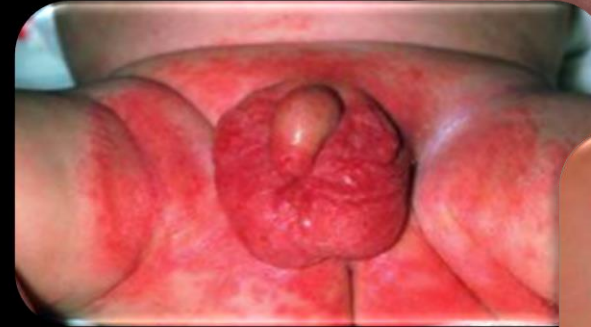
REDNESS



Skin Injuries

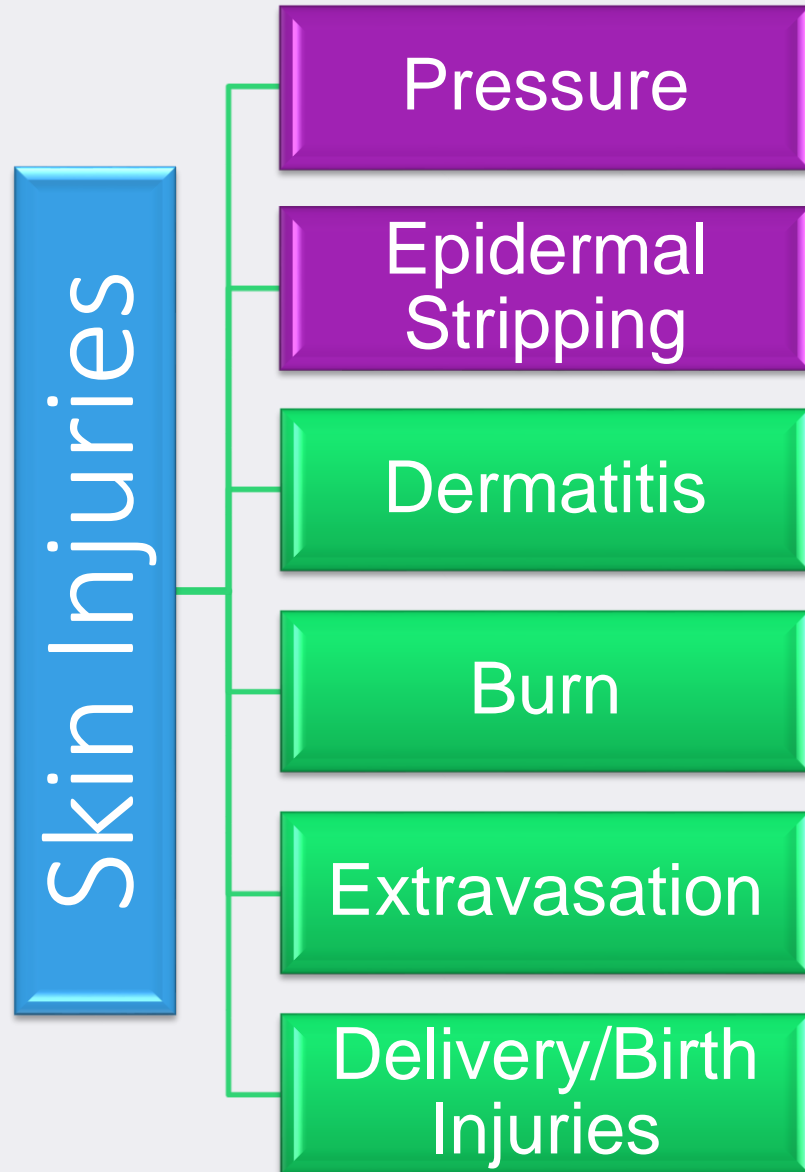
- Pressure
- Epidermal Stripping
- Dermatitis
- Burn
- Extravasation
- Delivery/Birth Injuries

DERMATITIS



BURNS





Walker et al. (2009)

n= 43, extremely preterm infants
 n= 44, matched term controls
 Follow up at 11 years

- 20 mild scaring
- 11 Moderate procedural investigation
- 12 Scars from surgery

Differences in thermal sensitively but not mechanical sensitivity

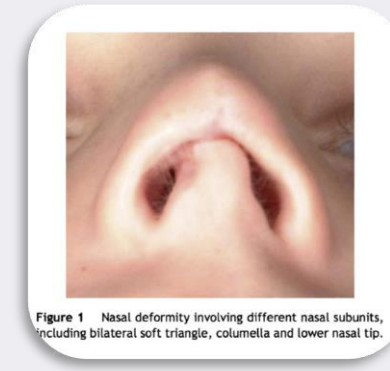


Figure 1 Nasal deformity involving different nasal subunits, including bilateral soft triangle, columella and lower nasal tip.

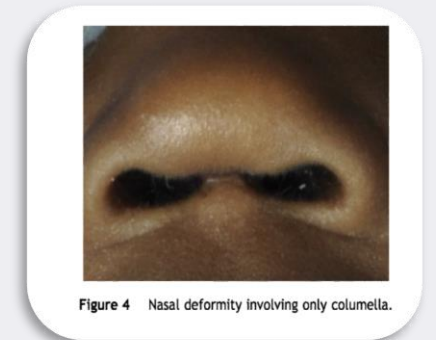


Figure 4 Nasal deformity involving only columella.

Li et al. (2015)

n=11 13.9 ± 4.6 years
 (born 25.6 ± 1.6 weeks)

Nasal deformities:

- Nostril asymmetry
- Collumellar asymmetry (septum)
- Nasal tip deviation
- Airway obstruction

OUTCOMES

Yong (2005)

n=89 (20% of 429)
2.3- 29.7 ± 2.5 weeks)
Pressure Ulcer Advisory Panel staging
n=12/41 (29%) mask
n=17/48 (35%) prongs
3 stages (stage 4 not used)

- Length of time of CPAP
- Born < 1500 grams (OR 2.28, 95% CI 1.43 to 3.64, p = 0.003)
- Nasal CPAP was used > 5 days (OR 5.36, 95% CI 3.82 to 7.52)
- Unit was > 14 days (OR 1.67, 95% CI 1.22 to 2.28)

Newman (2014)

n=78 (<1500 gm)
n= 35, mask
n= 21, prong
n= 22, rotation

NSCS- Lund (2004)

- Rotation group had best skin scores
- Risks included days on CPAP (p<0.001)
- Current gestational age (p=0.006)

Günlemez (2014)

n= 179
n= 87 Silicone gel
n= 92 control

Injury control- 13 (14.9%)
Injury gel- 4 (4.3%)
Necrosis higher in control

Bleeding
Crusting
Excoriated
Necrosis

NIPIRA Study

Collins (2014)

n= 132 (<32 weeks)
n= 67 HHF + whiskers
n= 65 NCPAP
n= 32 whiskers
n= 33 cannulaaide

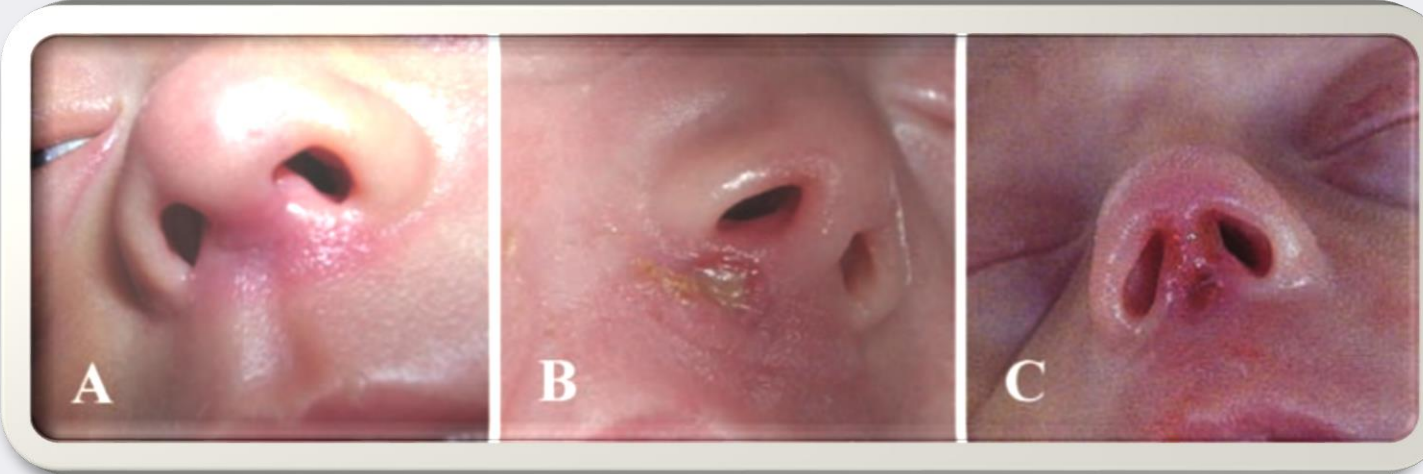
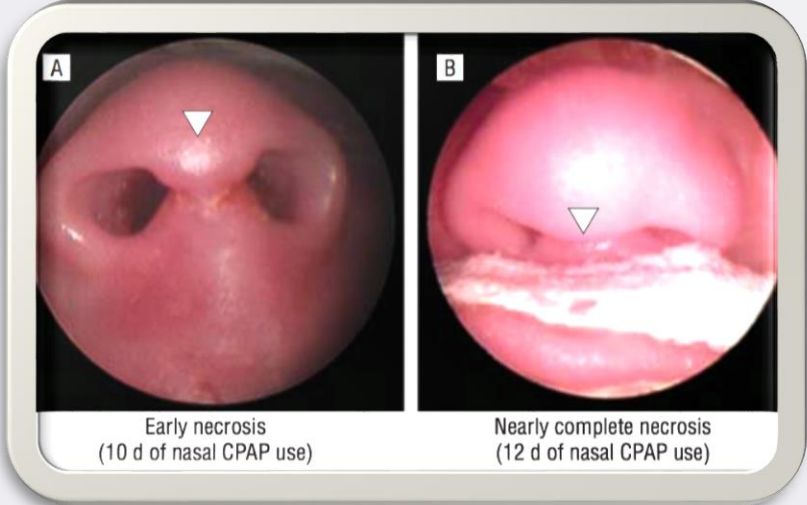
0-Normal
1-Pink/ red
2- bleeding/ulcer/scab
3-skin tear

- HHF + whiskers= less injury in 7 days post extubation
- No difference in trauma scores
- Trauma score 2.8 (SD 5.7) or 11.7 (SD 12.5), p <0.001
- Wiskers 14.4 (SD 12.5) or Cannulaaide 9.5 (SD 7.3), p=0.006



Nasal Prongs vs. Masks & role of layers

Janata et al. (2010)



Fischer et al. (2010)

**Dollison and Beckstrand
1995**

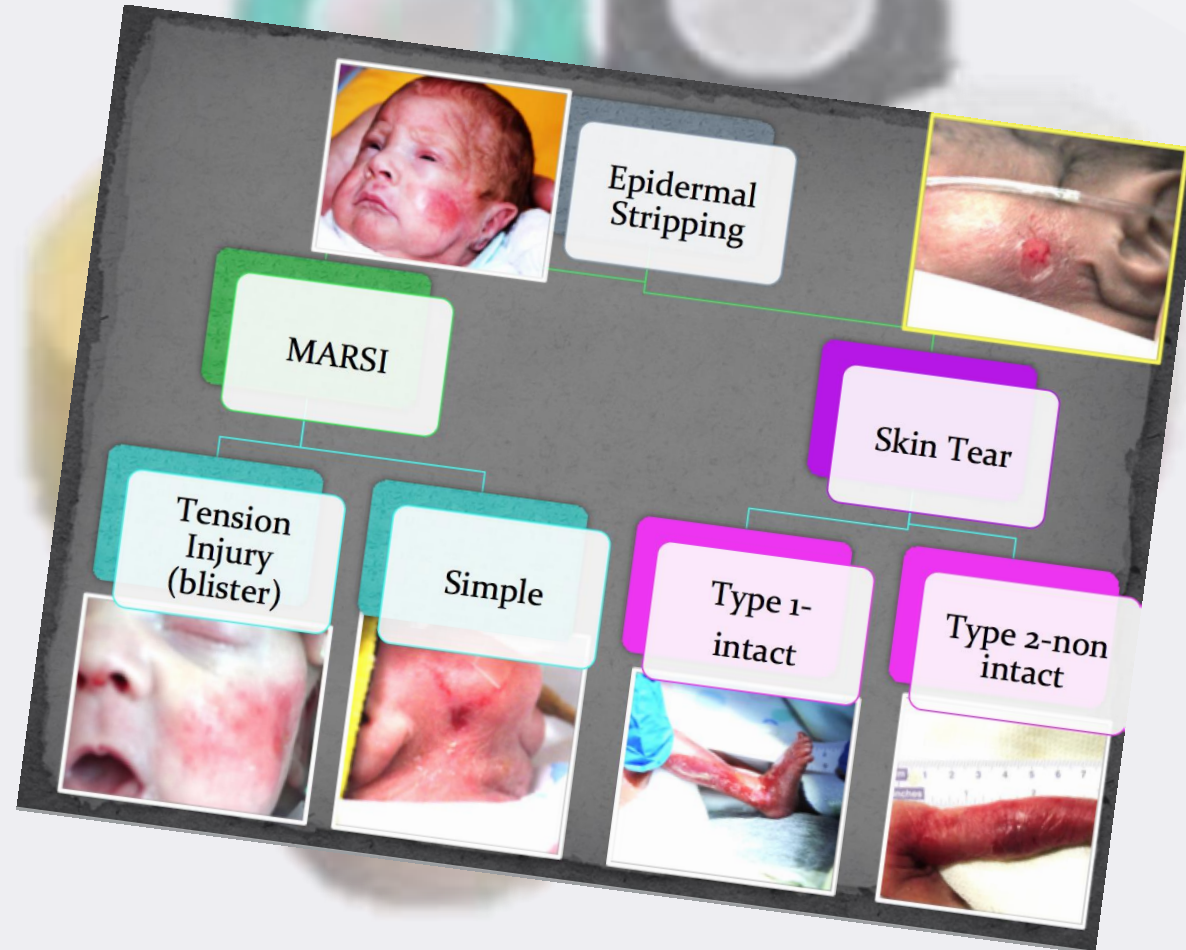
Case control-
pectin vs. adhesive

4/20 R pectin
vs.
13/20 R tape
3/20 E tape

20 neonates
(28-33 weeks)

I- intact/moist
D- dry
R- red intact
E- excoriated

Lund et al 1986



**Lund et al.
1997**

Control site vs.
3 adhesives: plastic,
pectin, gel

Pectin and plastic
significantly worse
measurements

30 neonates
(26- 40 weeks)

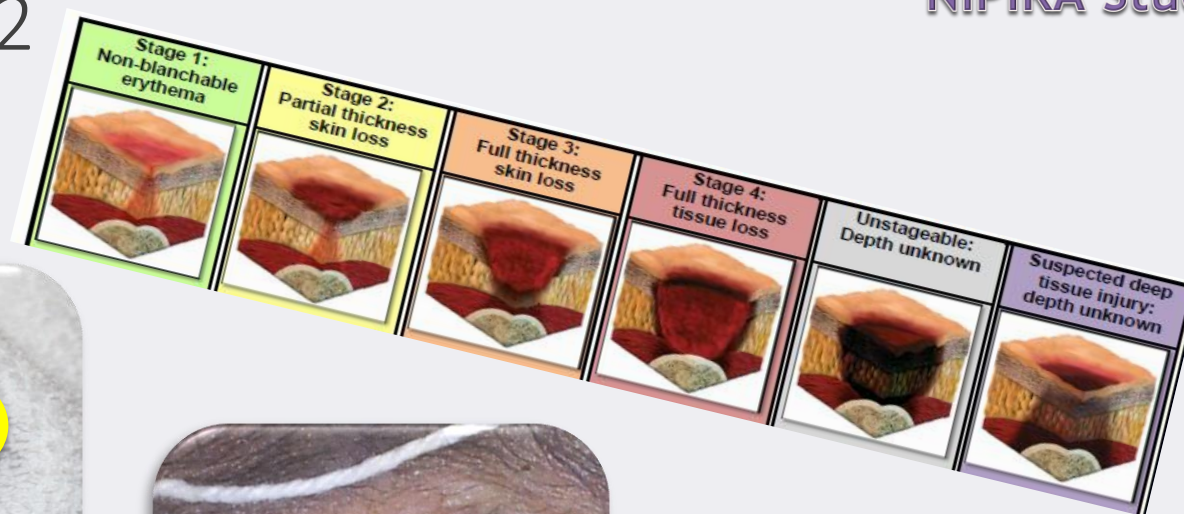
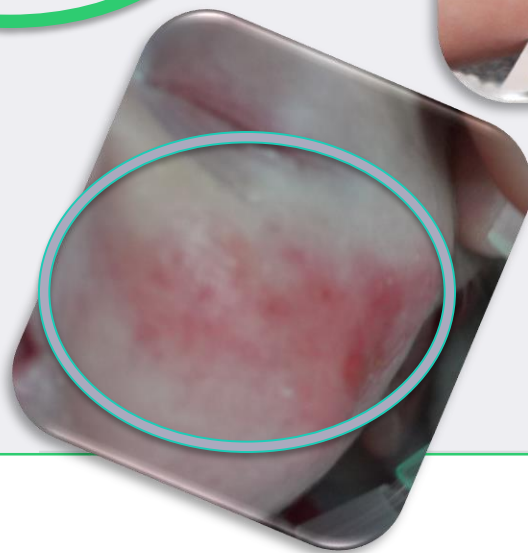
Irritation/Stripping scales
+TDWL and colorimeter
measurements

DEPTH



REDNESS

NEONATAL SKIN AUDIT 2010-2012



Neonatal Skin audit cohort

2 years: **247 patients**

No injury occurred

n=170

Injuries occurred

n= 77

(107 injuries)

Mean birth weight : 1155g

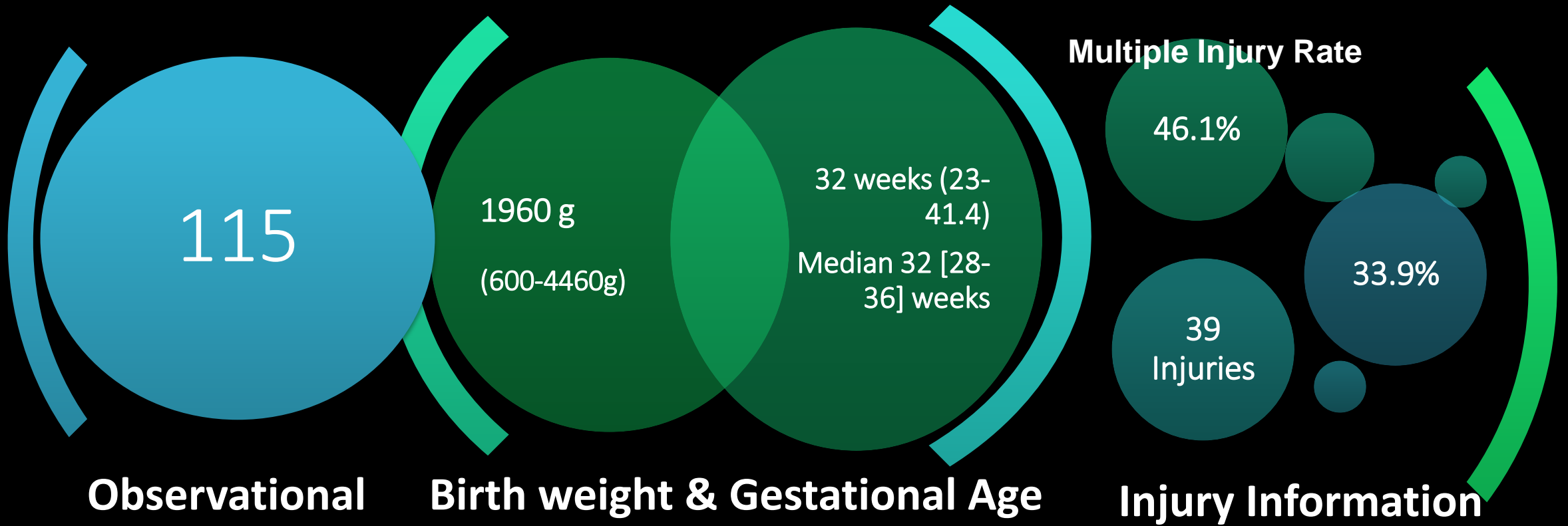
(range 445-2678g, SD 620g)

Gestation: 28 weeks

(range 22-41 weeks, SD 4.1)



PROSPECTIVE (DAILY REPORTS OVER 9 MONTHS)



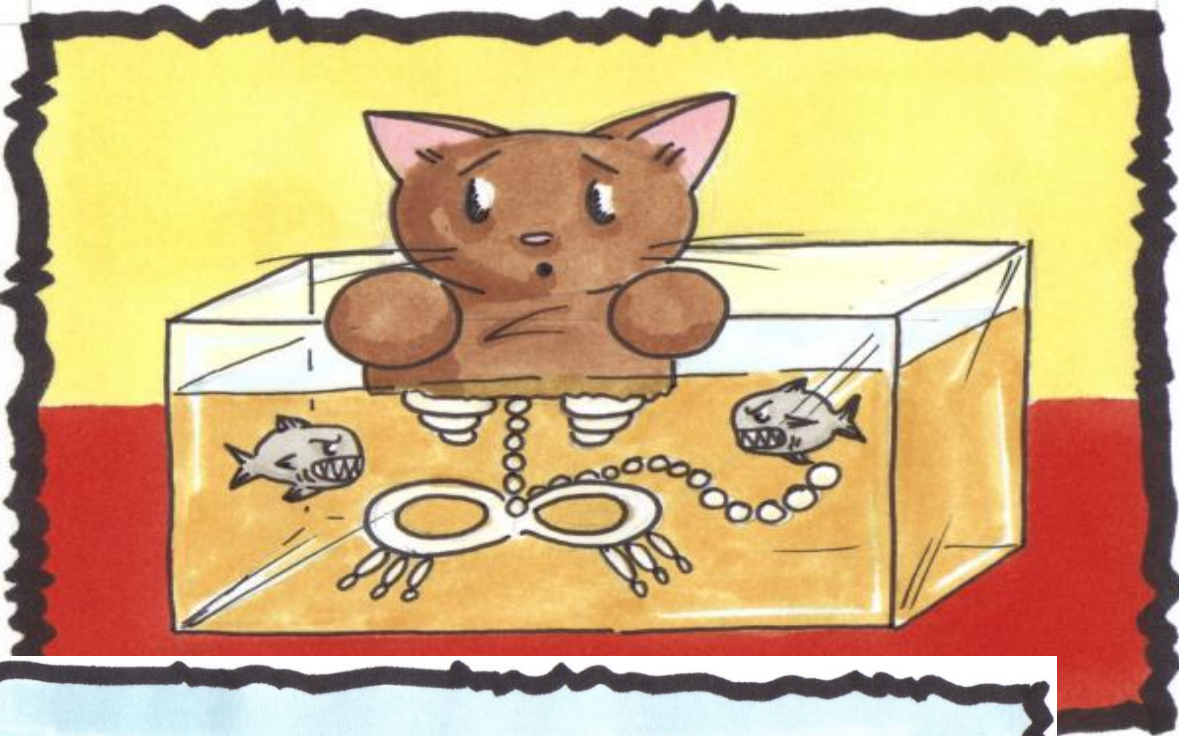
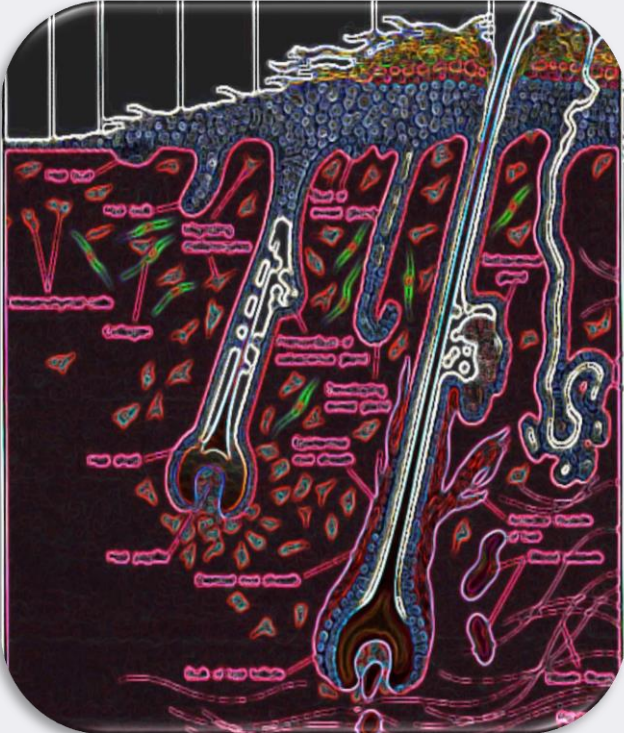


Weeks of Age	1st Week	2nd Week	Older
Stages 1-4	16	2	9
Stripping	6	4	1
2 nd Injury	9	2	7

PILOT OUTCOMES

Skin

Assessment for measurable outcomes





NEONATAL SKIN RISK ASSESSN

General Physical Condition	4. Gestational age < 28 weeks	3. Gestational age > 28 weeks but < 33 weeks	2. Gestational age > 33 weeks
Mental Status	4. Completely limited Unresponsive (does not flinch, grasp, moan, increase blood pressure, or heart rate) to painful stimuli due to diminished level of consciousness or sedation.	3. Very limited Responds only to painful stimuli (flinches, grasps, moans, increased blood pressure or heart rate).	2. Let
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Activity	4. Completely bed-bound In a radiant warmer with a clear plastic "saran" tent.	3. Limited bed bound In a radiant warmer without a clear plastic "saran" tent.	2. In a isol
Nutrition	4. Very poor NPO on intravenous fluids.	3. Inadequate Receives less than optimum amount of liquid diet for growth (formula/	2. Is o xshi nu

OUTCOMES

THANK YOU

