

UNDERSTANDING MOISTURE ASSOCIATED SKIN DAMAGE (MASD)

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WHAT IS MASD?

Skin damage caused by the presence of sweat or other bodily fluids that disrupt the skin barrier and cause damage.



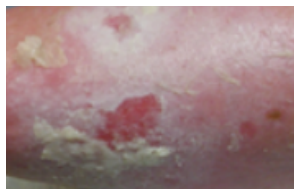
TYPES OF MASD

- **Incontinence-associated dermatitis.**
- **Peristomal dermatitis.**
- **Periwound maceration.**
- **Intertriginous dermatitis.**

HOW TO PREVENT/ MANAGE?

Best way to prevent/manage is to focus on the cause:

- Incontinence - utilise products that provide protection against bodily fluids (eg. barrier cream, superabsorbent pads, provide more regularly skin care to keep area dry). Refer patient to incontinence services as their assessment is key to manage the incontinence (cause of MASD).
- Peristomal - review the current stoma care plan and discuss with a specialist if required. There are products that will provide protection against leakage from the stoma bag and also a multitude of stoma products that can avoid the leakage.
- Periwound maceration - The key factor that needs to be managed is wound exudate as this would be causing wound edges and periwound skin maceration. Utilising skin barrier cream/films will avoid skin maceration. Refer to wound care specialist team, for advice, if required.
- Intertriginous Dermatitis - remove sweat from skin folds using appropriate products; changing the products regularly to provide skin care, and keep the areas clean and dry. Utilise barrier cream/film to prevent/ manage the skin damage.



AVOID THE USE OF INCONTINENCE PADS OR NAPPIES, UNLESS NECESSARY, AS THIS CAN LEAD TO FURTHER SKIN DAMAGE FROM HEAT.

Patients with MASD are at a higher risk for further skin damage, including Pressure Damage, so this must be considered when assessing the patient's risk.

A multidisciplinary team approach will lead to better outcomes as well as involving a Specialist Wound Care Nurse.

The patients must be involved in the care plan, to ensure their needs are being met.