

Things you need to know if you self-harm

Information for people who self-harm and those who care for them

Self-harm can affect people in all walks of life, from all professions and all social/cultural backgrounds. It is not a mental illness but a way of expressing emotions that may be difficult to speak about. Many people who self-harm feel disempowered over aspects of their life and this can be a way of regaining feelings of control. This leaflet aims to empower those who self-harm by providing information on caring for their wound, preventing infection and when to seek help for their wound.

Further information and support

The National Self Harm Network

<http://www.nshn.co.uk/>

Mind

<http://www.mind.org.uk>

The site

Support and information services for
16 - 25 year olds

<http://www.thesite.org>

NHS Choices

<http://www.nhs.uk/conditions/Self-injury>



“some people do it for attention.....that doesn't mean they should be ignored. There are plenty of ways to get attention, why cause yourself pain? And if someone's crying for help, you should give them it, not stand there and judge the way they're asking for it”

Anon (taken from www.nshn.co.uk)

I'm thinking about self-harming - what can I do?

Where possible try one of the following instead of self-harming, many people have found the following helpful;

- talk to someone you trust about how you're feeling
- snap an elastic/rubber band on your wrist
- squeeze ice cubes
- draw on yourself in red marker pen
- take a photo of yourself when you're feeling upset, write all over it how you are feeling and then destroy the picture
- mix warm water and food colouring and put it over your skin
- take a hot shower and exfoliate with body scrub.

These are taken from the National Self Harm Network

www.nshn.co.uk

Why does it matter if I cut or burn my skin?

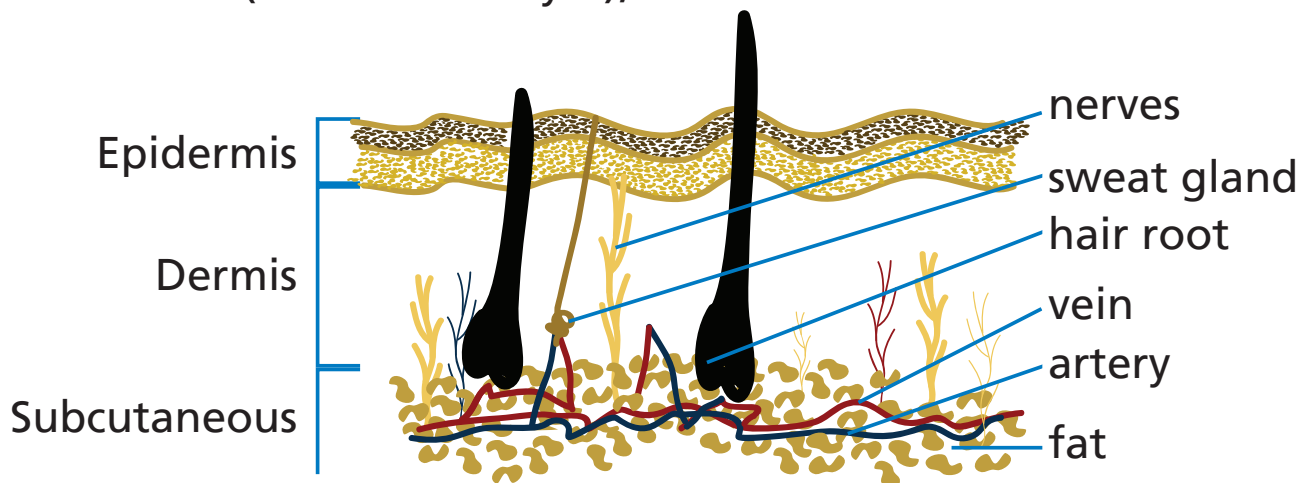
The skin is the largest organ of the body and receives 33% of our total blood supply. The skin has many functions including;

- protection from bacteria
- temperature control
- absorption of vitamin D (through exposure to sunlight)
- getting rid of salt (salt excretion) in the form of sweat and
- sensation - the skin contains an extensive network of nerves that detect and relay changes in the environment such as heat, cold, touch and pain.

Extensive damage to the skin can compromise these functions and any cut/burn will allow bacteria to enter the body and multiply.

Damage to the skin can cause scarring for life.

The skin is made up of 2 layers, the epidermis (the top layer) and dermis (the bottom layer);



Epidermis no blood supply
 0.04mm thick
 up to 5 very thin layers that provide new cells

Dermis good blood supply
 2mm thick
 made of elastic fibres
 contains: blood vessels, nerve endings, lymph vessels (lymph helps to produce blood cells, maintains the body's internal fluid and transports proteins to the blood system), sweat glands and hair root/follicles

A cut, the depth of this line, – will go through both layers of skin and into the subcutaneous (fatty) tissue and underlying structures;

Subcutaneous not part of the skin
 attaches dermis to underlying structures
 protects, insulates and stores energy

Muscle beneath the subcutaneous layer
 elastic with a good blood supply
 needed to move parts of the body

Tendon white band of connective tissue
 attaches muscle to bone

Ligament connects bone and cartilages

It can't do any long-term damage though can it?

- Any damage to the skin will cause bleeding and provide a route for infection to enter.
- Damage deeper than the skin (more than 2mm) risks permanent damage to underlying tendons and ligaments that could cause a physical disability.
- The severing of a tendon will disconnect the muscle from the bone and the limb will not respond to 'messages' from the brain to 'move'. **A tendon will not grow back.**
- Damage to an artery can be life threatening and cause a rapid loss of consciousness leading to death, if the bleeding is not stopped.
- Damage to the dermis will affect the lymph vessels contained there.
- Damage to the nerve endings can cause a loss in pain and touch sensations.

Some structures cannot be repaired and the damage will be permanent. It is easy to cut a nerve without realising it.

When should I get help?

- If the wound appears infected (see page 6) seek advice from a GP as antibiotics or an antimicrobial dressing may be needed. These kill or inhibit the growth of micro-organisms such as bacteria.
- Any of the following burns/scalds should be seen in A+E:
 - to the hands, face or feet
 - going all around the area in a circle and joining up,
 - that cover more than 3% of the body (1% is considered to be the size of your palm for adults)

Please see further instances of when you should get help in the first aid section on page 7.

How do I look after my wound?

The main principles of wound care are to prevent infection and promote healing. The following is a basic guide to looking after a wound:

1. Wash hands with soap and water, dry thoroughly.
2. Carefully remove the 'old' dressing and discard. Sterile dry dressings bought from chemists need changing daily to prevent them 'sticking' to the wound. If they do stick, **do not pull them off** as this will damage the new tissue. Soak off in warm water.
3. Cleanse the wound in warm tap water.
4. Carefully dry around the wound – do not touch the wound when drying, as fibres may get in and they will act as a focus for infection.
5. Inspect the wound for any signs of infection.
6. Redress with a sterile dressing, sealing all edges.
7. Wash hands with soap and water, dry thoroughly.

The dressing may need changing more than daily if the wound is leaking a lot of fluid. This can be recognised by the presence of wound fluid on the outside of the dressing. If not changed infection can get in. Do not leave a wound until the next day as this may lead to increased scarring, delayed healing and infection. Do not allow the wound to dry out, keep it covered with a dressing, as this will delay healing.

Be careful not to get soap products/bubble bath into your wound when you are having a bath or shower.

So, what should I keep in my First Aid Box?

The following (available from your local pharmacy/chemist/GP) may be useful to keep in a first aid box that you can get to quickly and easily:

- Sterile dry dressings (in individual sealed packs)
- Tape
- Steri-strips
- Sterile absorbent pads
- Scissors
- Bandages
- List of 'signs of infection' (see p6)
- Pain killers such as paracetamol or ibuprofen
- Cling film (to cover burns that need to be seen in A+E) - not to be used on the face/head

How do I know if my wound is infected?

The key to preventing infection lies in how sterile the implement used to self-harm was and how clean the wound is kept.

Blades can be sterilised in boiling water, shop bought disinfectants or be single use disposables.

The cleanliness of the wound is maintained through good hand washing and the use of sterile dressings.

A wound can easily become infected either through initial contamination (non sterile implement used to self-harm) or from poor aftercare (not washing hands, touching the wound, leaving dressings off). The wound care principles described earlier will help prevent infection.

When dressing the wound, look for the following

signs of clinical infection:

- redness spreading from the wound
- pus
- more wound fluid leaking than there had been
- increased pain and tenderness in the area
- increased smell
- no healing taking place (a cut should heal and scar within 4 weeks)
- bleeding not associated with a 'stuck' dressing
- increased heat/swelling in the area

If three or more of the above signs are present the wound is showing signs of infection and needs assessing by a healthcare professional for antibiotics or an antimicrobial dressing (depending on the severity of infection). **Wound infection, if left untreated, can cause intense pain, blood poisoning and death.**

Is there a way to minimise scars?

All scars are initially raised and pinkish, they flatten and become pale over the course of a year. Scar tissue is very vulnerable as the healing process beneath the skin takes a year to complete. Wounding to the same site causes the tissue to become hard, making the skin more rigid and decreasing limb flexibility.

Sharp implements produce 'finer' scars as less pressure is needed to cut and there is less tissue loss. Keeping the wound in a moist healing environment by sealing it under a dressing reduces scarring. www.changingfaces.org offer a skin camouflage service. Self-referral and healthcare professional referral is via their website.

First Aid

Cigarette burn

- 1 Place under cool tap water for 20 minutes to stop the burning process.
- 2 Cover with sterile dressing, seal all edges to prevent infection getting in.
- 3 Change the dressing daily, cleansing the area with warm tap water to monitor the wound and reduce the number of bacteria.
- 4 Monitor for signs of infection (see page 6).
- 5 **Consider the need to see GP/ Practice Nurse/A+E.**

If blood is spurting from any wound dial 999 immediately as you may have hit an artery.

Scald

- 1 Place under cool tap water for 20 minutes to stop the burning process.
- 2 If blisters are present, do not burst as they protect the wound from infection.
- 3 Cover with sterile dressing, seal all edges to prevent infection getting in when/if blisters burst.
- 4 Monitor for signs of infection (see page 6).
- 5 Change daily. If blisters have burst cleanse with warm tap water to reduce the number of bacteria.
- 6 If blisters aren't present use 'After Sun' or a good moisturiser to stop skin drying out.
- 7 **Consider the need to see GP/ Practice Nurse/ A+E.**

Cuts

- 1 Apply pressure with sterile pad to stop bleeding.
- 2 **If bleeding has not stopped after 10 minutes continuous pressure go to A+E.**
- 3 If the cut is not deep pull the edges together and secure with 'steri-strips'. These are sticky tapes that can be purchased at chemists and will hold the skin edges together.
- 4 Cover with sterile dressing, seal all edges to prevent infection getting in.
- 5 Change sterile dressing daily to monitor wound infection (see page 6).
- 6 Remove steri-strips after 12 days; do not remove earlier even if they have blood on them as this may cause the wound to re-open.
- 7 **If the cut is deep and it appears there may be damage to underlying tendon/ ligament/muscle go to A+E for assessment and stitching.**
- 8 If the wound has been stitched cover with a sterile dressing and proceed as above.

**If you need this information in another language
or format please telephone 0116 295 0994 or
email: Patient.Information@leicspart.nhs.uk**

Arabic

إذا كنت في حاجة إلى قراءة هذه المعلومات بلغة أخرى أو بتنسيق مختلف، يرجى الاتصال بهاتف رقم 0116 295 0994 أو إرسال بريد إلكتروني إلى: Patient.Information@leicspart.nhs.uk

Bengali

যদি এই তথ্য অন্য কোন ভাষায় বা ফরমেটে আপনার দরকার হয় তাহলে দয়া করে 0116 295 0994 নম্বরে ফোন করুন বা Patient.Information@leicspart.nhs.uk ঠিকানায় ই-মেইল করুন।

Traditional Chinese

如果您需要將本資訊翻譯為其他語言或用其他格式顯示，請致電 0116 295 0994 或發電子郵件至：Patient.Information@leicspart.nhs.uk

Gujarati

જો તમારે આ માહિતી અન્ય ભાષા અથવા ફોર્મેટમાં જોઈતી હોય તો 0116 295 0994 પર ટેલિફોન કરો અથવા Patient.Information@leicspart.nhs.uk પર ઇમેઇલ કરો.

Hindi

अगर आप यह जानकारी किसी अन्य भाषा या प्रारूप में चाहते हैं तो कृपया 0116 295 0994 पर हमें फोन करें या Patient.Information@leicspart.nhs.uk पर हमें ईमेल करें

Polish

Jeżeli są Państwo zainteresowani otrzymaniem niniejszych informacji w innym języku lub formacie, prosimy skontaktować się z nami telefonicznie pod numerem 0116 295 0994 lub za pośrednictwem poczty elektronicznej na adres: Patient.Information@leicspart.nhs.uk

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਜਾਂ ਫਾਰਮੈਟ ਵਿਚ ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ 0116 295 0994 ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ ਜਾਂ ਇੱਥੇ ਈਮੇਲ ਕਰੋ: Patient.Information@leicspart.nhs.uk

Somali

Haddii aad rabto in aad warbixintan ku hesho luqad ama nuskhad kale fadlan soo wac lambarka 0116 295 0994 ama email u dir: Patient.Information@leicspart.nhs.uk

Urdu

اگر آپ کو یہ معلومات کسی اور زبان یا صورت میں درکار ہوں تو براہ کرم اس ٹیلی فون نمبر 0116 295 0994 یا ای میل پر رابطہ کریں Patient.Information@leicspart.nhs.uk