

WINTER PREPAREDNESS





PROTECT CLIENTS FROM THE COLD

People with disabilities may want to take extra care during the cold weather season.

Some disabling conditions may limit sensory abilities and the ability to maintain body heat.

TIPS

Wear multiple layers of clothing and include:

- ❖ A scarf around the neck
- ❖ A winter hat
- ❖ Mittens – with a pair of thermal gloves beneath if possible
- ❖ Boots – waterproof, insulated for warmth and to help prevent slipping on ice
- ❖ Two pairs of socks





CONDITIONS CAUSED BY THE COLD

Cold weather exposure can lead to frostnip, frostbite, hypothermia, and chilblains.

FROSTNIP

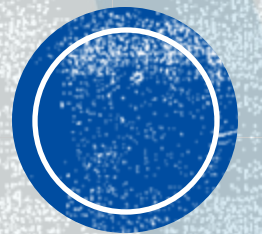
Frostnip is a milder form of cold injury. It usually affects areas of skin exposed to the cold, such as the cheeks, nose, ears, fingers, and toes, leaving them red and numb or tingly. Frostnip gets better with rewarming.





FROSTBITE

Occurs when skin is exposed to a temperature lower than 14-degree F (-10 degree C).



FROSTBITE:

With superficial frostbite, the skin feels warm.

A fluid-filled blister may appear 12 to 36 hours after rewarming the skin.

With deep frostbite there may be numbness.

Joints or muscles may stop working.

Large blisters may form 24 to 48 hours after rewarming. The tissue turns black and hard as it dies.

Frostbite requires prompt medical attention.



TO TREAT

Get into a warm environment.

Remove wet clothing.

Rewarm in warm water.

If warm water unavailable, wrap in warm blankets or use body heat.

FROSTBITE CAUTION

Since skin may be numb, victims of frostbite can harm themselves further. Use caution when treating frostbite and:



1
UNLESS NECESSARY,
DO NOT WALK ON
FEET OR TOES
WITH FROSTBITE



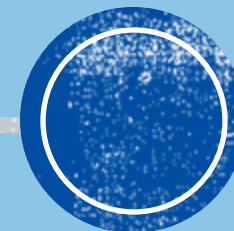
2
DO NOT USE A
FIREPLACE, HEAT
LAMP, RADIATOR,
OR STOVE FOR
WARMING



3
DO NOT USE A
HEATING PAD
OR ELECTRIC
BLANKET FOR
WARMING



4
DO NOT RUB
OR MASSAGE
AREAS WITH
FROSTBITE



An illustration showing a person's foot submerged in a clear glass filled with water. A red thermometer is placed in the water to the left of the foot. The water level is high enough to cover the foot. The background is a light blue, textured surface.

TO RE-WARM

Immerse chilled parts in warm, not hot, water (about 100°F) for 20 to 30 minutes until sensation returns.

Numb hands or feet will not feel the temperature of the water and severe burns can result if the water is too hot.



RE-WARMING FROSTBITE



- ❖ Re-warming is accompanied by a burning sensation.
- ❖ The skin might blister and swell; might turn blue, red, or purple.
- ❖ When a person's skin is pink and is no longer numb, the area is thawed.
- ❖ Do not thaw areas of a person's skin that are frostbitten if there is a risk for re-freezing before medical attention is available.
- ❖ Skin that is thawed and then re-frozen may result in severe tissue damage.



PREVENTION

- ❖ Monitor for early signs of frostnip or frostbite.
- ❖ Dress in layered and warm clothing.
- ❖ Cover parts of body most prone to frostbite.
- ❖ Use inner layers that absorb moisture.
- ❖ Use outer layers that are waterproof and windproof.
- ❖ Go indoors to warm at regular intervals.



FROSTBITE

SYMPTOMS

- Surface skin damage
- Numb skin
- Loss of feeling

PREVENTION

- Avoiding temperatures below -15°C
- Avoiding moisture
- Layering clothing
- Using warming devices



HYPOTHERMIA

- ❖ Body core temperature drops below the required temperature for normal metabolism and body function defined as 95 degrees F.
- ❖ Hypothermia can quickly become life threatening.





WARNING SIGNS OF HYPOTHERMIA

Slow, shallow breathing
Slow, weak pulse
Clumsiness
Numb hands and fingers
Fatigue, memory loss
Cold, red skin



RISKS FOR HYPOTHERMIA



- ❖ Persons with intellectual disabilities or physical disabilities such as cerebral palsy are also at higher risk for hypothermia.
- ❖ Some may not know how to keep warm when exposed to the cold.
- ❖ Persons who cannot move their bodies easily cannot generate heat from muscle movement. They may also not be able to cover exposed parts of their skin.



RISK FROM MEDICATIONS:

Medications which affect thermoregulation include:

- ❖ Sedatives or sleeping pills.
- ❖ Tranquilizers (benzodiazepines) such as lorazepam.
- ❖ Antidepressants, antipsychotics.
- ❖ Some heart drugs including beta blockers and clonidine.





STAGES OF HYPOTHERMIA: MILD

- ❖ Temperature: 90 to 95°F (32 to 35°C)
- ❖ Shivering, goose bumps.
- ❖ Cold to touch.
- ❖ Bluish skin.
- ❖ Confusion, memory problems.
- ❖ Trouble speaking.
- ❖ Lack of coordination.





STAGES OF HYPOTHERMIA: MODERATE

- ❖ Temperature: 82 to 90°F (28 to 32°C)
 - ❖ Shivering stops
 - ❖ Sleepiness
 - ❖ Hallucinations



STAGES OF HYPOTHERMIA: SEVERE

- ❖ Temperature: less than 82°F (28°C)
- ❖ Stiffness.
- ❖ Loss of consciousness or coma.
- ❖ Breathing stops.
- ❖ Heart stops.



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TREATMENT

Move the person to a warm, dry place



Remove wet clothing & place person in blanket



Give patient warm drinks



Cover the head to retain body heat

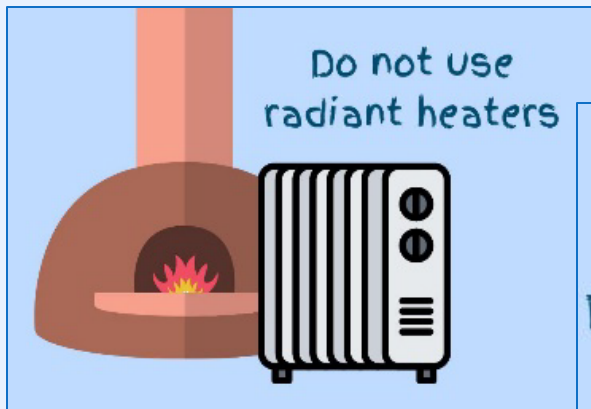


- ❖ Protect person against wind, drafts and further heat loss.
- ❖ Begin rewarming with extra clothing and warm blankets.
- ❖ Take the person's temperature if possible.



WHAT NOT TO DO:

- ❖ Hot packs or heating pads should be avoided as these can cause burns to the skin.
- ❖ Avoid alcohol and caffeine which speed up heat loss.
- ❖ Do not briskly rub or massage the person's extremities as with severe hypothermia; this muscle activity can cause the heart to stop.



PREVENTION

OF HYPOTHERMIA

- ❖ Avoid staying out in the cold for long periods of time.
- ❖ Dress warmly and in layers.
- ❖ Head for a shelter that will protect from wind or rain if you are wet or cold.
- ❖ Avoid activities that cause increased sweating. Sweating increases heat loss through evaporation and will cause you to feel cold.
- ❖ Avoid touching metal, especially with wet hands, because it will make you feel colder and may cause frostbite.



Avoid extremely cold, wet or windy conditions



CHILBLAINS



- ❖ Chilblains are thought to result from an abnormal vascular response to the cold.
- ❖ Persons are more at risk for getting chilblains if they use nicotine or other drugs that reduce blood flow to the extremities.



SYMPTOMS

- ❖ Itchy, painful, reddish or purplish areas of swelling usually affecting fingers, toes, nose or ears.
- ❖ Blisters or small open sores may develop.
- ❖ Symptoms may last for several days.
- ❖ After healing, the area may be very sensitive to the cold in the future





PREVENTION OF CHILBLAINS

- ❖ Avoid or limit exposure to cold.
- ❖ When coming in from the cold, rewarm the skin gradually.
- ❖ Dress in layers of loose clothing and wear mittens, a scarf and a hat, and warm, water-resistant footwear.



WINTER PREPAREDNESS

Thank you
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