

## Ten top tips from *Wounds International* in 2014

**W***ounds International* is delighted to announce that we are now averaging over 50 000 visitors to the website each month from 150 different countries. In October and November 2013, we recorded a large jump in our figures, mainly due to the interest created around the International Wound Care Conference held in Kuala Lumpur, Malaysia in October.

It is hugely encouraging and rewarding that so many clinicians are taking an active interest in the content of *Wounds International*. Unsurprisingly, the most popular and often downloaded articles continue to be the practical papers – especially the “Ten Top Tip” series, which focuses on practical aspects of wound management. With this in mind, we plan to dedicate a greater percentage of the journal to this style of article.

### **Burns care and the vulnerable patient**

In this issue, John McRobert and Krissie Stiles have written a “Ten Top Tips” feature on managing burns (page 9). He presented a talk on burns management at the Wounds UK event in Harrogate in November 2013, where the focus was on the role and responsibilities of the tissue viability nurse in managing burns, recognising that – in the UK – managing these wounds will increasingly be the domain of the tissue viability nurse, rather than the specialist burns nurse. John held the attention of the audience throughout his talk and described a number of case studies including some illustrating burns that occurred as a result of non-accidental injury and neglect. The most shocking of all the cases is also highlighted in this issue: a patient in a care home who had been placed in scalding bath water (page 14).

So much can be gained by sharing experiences and reporting clinical cases that are complex or rare and where insight and understanding can help improve patient care.

### **A picture of a wound speaks a thousand words**

Presenting photographic evidence to support the text when writing a case report is critical to

the value of the story. Unfortunately, however, the quality of the photographs submitted is frequently disappointing. Healthcare professionals are continually being asked to expand their skill sets and being an expert photographer is not necessarily seen as a frontline requirement for wound management. Nonetheless, photographs are often an important part of ongoing assessment and – now that so many of us have access to digital cameras and mobile devices – the opportunity to record wound progression in this way is becoming ever easier. There are some simple techniques that make a big difference to the quality of digital images of wounds presented by Beth Sperring and Ralph Baker (page 7).

### **Getting the word out about your service**

Another feature of the expanding role of the clinical expert is the need to develop skills in marketing and communications. This need varies between countries and healthcare systems but, increasingly, clinicians are required at some level to help drive the promotion of their services; other healthcare professionals and patients need to know what is available and how to access specialist services. In view of this demand, “Ten Top Tips” for promoting a wound service is also included in this issue (page 15).

### **The New Year**

2014 will see a number of changes and exciting new initiatives from *Wounds International*. These include more international events, webcasts and consensus documents. As always, we welcome new authors and would be delighted to consider papers focusing on innovation, case studies, or technology updates. It is important to share information about practice that has worked well but, equally, we are interested in experiences that have been less positive, but where lessons learned can be shared to maximise benefits to patients.



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