



Suzie Calne
looks at the latest
developments in
wound diagnosis

Diagnostics can lead us into the future

On June 30th Wounds International launched its first advanced Masterclass, which took an in-depth look at wound diagnostics and their potential to play a vital role in modern wound care practice. The speakers demonstrated that the future lies with developing simple diagnostic tools which can be easily used at the bedside and will quickly indicate physical parameters in the wound, such as matrix metalloproteinases and nitric oxide levels, that might have an impact on healing.

It was suggested at the meeting that data collected in this way will help clinicians to select the right therapy at the right time for the right patient. These developments are eagerly awaited as these kind of diagnostic tools will have massive implications for improving patient care and ensuring better use of resources.

Events like the Masterclass provide a rare opportunity for the delivery of focused, valuable education. This is in keeping with our editorial policy on Wounds International and is reflected in all the papers published in this issue, which are designed to be short, practical and informative.

The overall theme is skin integrity and authors from a variety of countries have looked at the management of the skin surrounding different wound types. Periwound skin problems can

cause the patient more pain and discomfort than the wound itself and accurate assessment is vital.

One of the features of the journal that we hope you find particularly helpful are the *Expert Commentaries*, which aim to provide vital information presented in a few key sentences. In this issue Deborah Hofman stresses how important it is to rule out fungal infection when using skin barrier products. In another thought-provoking commentary Jacqui Fletcher urges clinicians to distinguish between incontinence-associated dermatitis and pressure ulcers when collecting prevalence and incidence data. She argues strongly that lumping all incidences of skin damage together can be detrimental to patient outcomes as well as having a cost implication for the healthcare provider.

This issue also features Arne Langøen from Sweden who writes about innovative care of the skin surrounding pressure ulcers. His article includes practical tips on how to recognise whether an area of damaged skin is a pressure ulcer or in fact a sign of incontinence-associated dermatitis. He also describes the role of microclimate in pressure ulcer development, a subject which is also discussed in detail in the latest Wounds International consensus document *Pressure ulcer prevention: pressure, shear, friction and microclimate in context*.

Trish Hall and Catharine Steer from South Africa comment on a fascinating paper from a group of medical students who worked in a rural hospital in Uganda. The students illustrate the difficulties of managing wounds in an area where supplies are limited and provide dramatic photographic examples of how they overcame the

problem of high infection rates, despite poor equipment.

We have also introduced a new feature in this issue of Wounds International – a snapshot of the daily challenges faced by clinicians from around the world entitled Day in the life. This new feature is an ideal chance to tell other clinicians about your practice and if you would like to contribute please contact me at the address below.

This issue also coincides with the launch of the second in our series of short educational videos *5 Minutes, 5 Questions*. This format is proving very popular as it provides a simple 'dip in and out' option for the busy clinician.

You can now also register for the first Wounds International global wound care conference which will be held on February 1–3, 2011 in Cape Town, South Africa. This event aims to help clinicians from around the world share their practice and promote wound care as a truly international speciality.

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Editor, Wounds International

If you would like to contribute to a future issue of the journal, please contact Suzie Calne, the editor of Wounds International at: scalne@woundsinternational.com