

## Moving away from the words and onto the wards



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Firstly, I'd like to wish you all a warm welcome to the final issue of *Wounds International* for 2019. It's been a strange old year with Brexit continuing to dominate the headlines in the UK and beyond, to the point where most of us wish that the term 'Brexit' had never been uttered in the first place. But what's in a name? I ask because in November, the National Pressure Ulcer Advisory Panel (NPUAP) announced that it has changed its nomenclature to the National Pressure Injury Advisory Panel (NPIAP, 2019a).

The new name reflects the organisation's future direction — the term 'pressure injury' replaced 'pressure ulcer' in the NPUAP Pressure Injury Staging System in 2016 — as well as reiterating its commitment to adopt the internationally preferred term, 'pressure injury', as opposed to 'pressure ulcer'. Prior to the name change, NPIAP carried out a thorough review of all potential names, including pressure injury and pressure ulcer, before the organisation's board took the decision to push ahead with the new name.

There is no doubt that the specific terms used (injury or ulcer) have elicited passionate debate and I did dwell on this in a previous editorial (Bushby, 2017). Some clinicians believe that 'pressure injury' is incorrect due to pressure ulcers being caused by prolonged pressure and shear, which result in deformation of tissues. The term 'injury' could be construed to imply acuity, suggesting a pressure ulcer can occur within a fraction of a second, which is not the case. For its part, the NPIAP believes that the terminology change better describes pressure injuries to both intact and ulcerated skin.

While it would make sense on a practical level to agree on one universal term, it would perhaps be of greater use to focus attentions and energy on considering/developing more reliable methods for recognising imminent pressure damage, thus providing tangible benefits for patients. Which is where the new NPIAP, European Pressure Ulcer Advisory Board (EPUAP) and Pan Pacific Pressure Injury Alliance (PPPIA) guidelines — the third edition of the *Prevention and Treatment of Pressure Ulcers/Injury: Clinical Practice Guideline and Quick Reference Guide* — published in November 2019 take on the utmost significance.

This truly international collaboration between the NPIAP/EPUAP/PPPIA provides clinicians across the globe with evidence-based recommendations for the prevention and treatment of pressure injuries, regardless of where they are working. The new guideline straddles a critical gap by expediting the translation of research into practice to improve patient outcomes. You can purchase the full Clinical Practice Guidelines or download the e-version of the Quick Reference Guide here: <https://guidelinesales.com/page/EPUAP>

Over the years, there has been a number of terms used to label skin damage, including: pressure ulcers, pressure ulceration, pressure sores, bed sores, bed ulcers and decubitus ulcers. Whatever they have been called, they continue to cause considerable headaches to clinicians and patients alike across the globe, eating up large proportions of healthcare budgets, the world over. Hopefully, the name change should provide fresh impetus for the NPIAP to provide its not insignificant backing to much-needed scientific progress in diagnosing and treating force-related tissue damage. Now that the name change is set in stone, an onus on appropriate risk assessment and prevention strategies can only be a good thing, evidenced by the new guidelines.

Although it's obviously important to have standardisation when it comes to medical terms, as this standardisation provides clarity for clinicians, patients and carers, so that everyone is signing from the same hymn sheet, perhaps it is time to place the focus firmly on the clinicians delivering care and the patients receiving it. As professor Dr Dimitri Beeckman, the EPUAP president, stated on the launch of the guidelines: "We are looking forward to seeing how these new guidelines will be implemented and how they will further support better patient care" (NPIAP, 2019b).

Whether you are a proponent of 'injury' or 'ulcer', all that's left for me to do is wish you all a joyful and healthy festive season and a very happy new year!

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### References

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