Editorial and opinion

Wellbeing in wound care in Japan: Spreading a new concept



Author: Kyoichi Matsuzaki

The Japanese language is completely different from English and the word wellbeing is unfamiliar, even to healthcare professionals, except for those working in oncology. The concept of wellbeing focuses on positive aspects of health, such as independence and sense of satisfaction, contrary to the phrase "health-related quality of life", which examines negative aspects. There is no cultural obstacle to using the term wellbeing in Japan, but varied approaches and awareness programmes may be required to embed the term in wound care among the country's clinicians.

ccording to the Constitution of the World Health Organization (WHO), adopted in 1946, health is defined as the "state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity." However, even in the USA, a founding member of the WHO, the view "health is simply a diseasefree condition" prevailed until the 1970s, and epidemiological studies laid emphasis on objective outcome measures, such as morbidity, incidence of complications, and mortality. Later, in the 1980s, it was recognised in the USA that for individuals to remain healthy, not only physical health but mental health was also important. At present, the Centers for Disease Control and Prevention (a US federal organisation) clearly states that wellbeing involves reduction of morbidity, improvement of immunology and recovery potential, promotes longevity, improves labour productivity and encourages involvement and contribution in communities.[1]

Unfortunately, the term wellbeing is not well-known in Japan. Not many people understand the meaning of this term nor have heard of it. In September 2012, the 4th World Union of Wound Healing Society (WUWHS) was held in Yokohama, Japan. Seven months prior to this meeting, a seminar was conducted in Yokohama aimed at healthcare professionals engaged in wound care. At that time, we surveyed the

232 seminar attendees, asking them: "Are you familiar with the term wellbeing?" Of the 142 valid respondents, only one answered yes. Forty-two respondents (30%) answered they had heard of the term, and the remaining 99 respondents (70%) had not heard this term at all [Figure 1].

For native English speakers, it is possible to guess the meaning of wellbeing, based on the definitions of the component words, "well" and "being". However, the Japanese language is completely different from English and the word wellbeing is unfamiliar. This is probably the reason why 70% of the respondents answered they had never heard the term and the remaining 30% had difficulty associating with the word wellbeing.

However, considering that the term "quality of life" (QOL) has spread widely beyond healthcare professionals, we can assume that the statement: "For individuals to remain healthy, not only physical health but mental health is also important", is likely to be familiar to Japanese people, since no obstacle exists from a cultural perspective that could hinder the spread of wellbeing. Contrary to health-related QOL – which focuses on negative factors, such as pain, deterioration, and depression to evaluate health – the concept of wellbeing focuses on positive aspects, such as independence and sense of satisfaction.^[1]

The spread of wellbeing in Japan will depend on which of the terms – health-

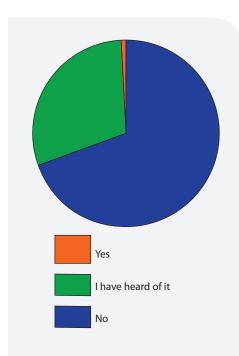


Figure 1. Response to the survey question "Are you familiar with the term wellbeing?"

related QOL or wellbeing – is a better fit and accepted in Japanese culture. Wellbeing is already known to those involved in cancer treatment and care in Japan. In the survey mentioned previously, the respondents who answered they had heard of wellbeing, had learnt of it in oncology units. This may provide a clue for promoting the term wellbeing among those involved in wound care.

Compared to wound care in Western countries, Japan has very few outpatient clinics to treat lower-extremity ulcers and a very high percentage of older patients with pressure ulcers. The lifestyle and values differ between bedridden patients with pressure ulcers and patients with lower-extremity ulcers who have the desire to continue their work or hobbies.

Varied approaches and awareness programmes may be required in Japan compared with Western countries. It is anticipated that focus and emphasis on the wellbeing for family members caring for the bedridden elderly will be more important relative to Western cultures.

Furthermore, the number of patients with leg and foot ulcers has been increasing in Japan. In particular, there has been an increase in the prevalence of diabetes in Japan partly due to a change in dietary habits to a Westernised diet, which has

resulted in a sharp increase in the number of patients with leg and foot ulcers and haemodialysis patients with diabetic nephropathy.^[2-3]

These patients tend to have various complications such as heart disease, and quite often have low compliance with medical instructions (including drug administration), which can further aggravate the condition. Among healthcare professionals, close attention has been paid to prescriptions and haemodialysis based on concordance and empowerment for diabetes. Concordance and empowerment must also be taken into consideration for wound care.

I was a member of the Expert Working Group that developed the International Consensus Document Optimising Wellbeing in People Living with a Wound[4] in the summer of 2012, and was also involved in editing the Japanese translation of this document sponsored by Smith & Nephew. Later that year, I conducted a lecture on wellbeing at the Japanese Society of Pressure Ulcers sponsored by Smith & Nephew. I also organised a symposium on wound care for haemodialysis patients at the joint meeting between the Japanese Society of Limb Salvage and Podiatric Medicine and the Japanese Society for Foot Care. At the 4th WUWHS and the Annual Conference of the Japanese Society of Cancer Nursing, Smith & Nephew sponsored a seminar on the topic of wellbeing.

At present, 1766 wound, ostomy and continence (WOC) nurses are active in Japan. A "brush-up" seminar on the topic of wellbeing is scheduled for this August aimed at enhancing the knowledge of WOC nurses. I hope that through the distribution of the International Consensus Document and seminars, the wellbeing concept will continue to spread in the field of wound care in Japan.

AUTHOR DETAILS

Kyoichi Matsuzaki works in the Department of Plastic and Reconstructive Surgery, Kawasaki Municipal Tama Hospital and Department of Plastic and Reconstructive Surgery, St Marianna University School of Medicine, Kawasaki, Japan.

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