Editorial and opinion

The cost of wounds

n this issue of Wounds International, the focus is on the diabetic foot ulcer, and there are a number of interesting articles included by authors from different countries offering a global perspective on the topic. Prevention and protection is the priority for all wounds, and it is of paramount importance that efforts are made to care for the foot and avoid skin damage. Foot care may include the management of fungal infection, which is addressed in Paul Chadwick's "ten top tips" (page 12). Paul explains that fungal infection will only be cured with intervention, and discusses the choice of treatments available.

We are delighted that Benjamin Lipsky from the US has written the guest editorial for this issue (page 4), and he discusses where we are now in relation to diabetic foot infection. He notes that "foot infection is the most common and costly complication of diabetes".

Cost-effective wound care

In June 2013, Wounds International held a consensus meeting with the intention of looking at the costs of wounds and the importance of wound prevention and management, with a need to make the case for cost-effective wound care. There is no doubt that this is an important topic.

Dr Douglas Queen, who co-chaired the meeting, stressed that:

"In most geographies, hundreds of thousands of patients experience the debilitating effects of acute and chronic wounds every day, costing global health systems billions of dollars annually. This wound epidemic is a growing problem that needs to be addressed immediately if we are to control both global and national healthcare costs.""

It is suggested that, in order to contain costs, we must recognise and address the need for specialist involvement to avoid the ongoing financial burden associated with wound chronicity.

The document will present clear guidance on what is meant by cost effectiveness and how to make an accurate and appropriate case for cost-effective wound care, enabling clinicians to make sensible decisions around treatment choices. The

meeting generated lots of debate, discussion, and sharing of experiences. The document, however, will show that there is nothing straightforward about health economics, and although the problems of cost effectiveness are not exclusive to wound healing, there are, nonetheless, specific challenges in quantifying and qualifying the costs of wounds.

The message is clear that when making a business case there are multiple factors to consider, and the key is to have access to reliable data to support the arguments presented. The consensus group stressed that one of the critical components in promoting cost-effective wound care is for clinicians to universally adopt and practice effective wound management protocols. With immense pressures on clinicians to justify the costs of care and the need to make difficult choices in relation to resources, the project is timely and was well supported by key opinion leaders and industry. This international document on cost effectiveness will be available from the Wounds International home page at the end of November 2013.

Global wound care

As this issue goes to press, the *Wounds International* team will be in Malaysia where we are delighted to be working with Dr Harikrishna and the Malaysian Society of Wound Care Professionals in delivering the "Global wound care made local" conference on 18–20 October 2013 in Kuala Lumpur. The programme includes presentations on the costs of wounds, as well as many interesting innovations, such as the role of stem therapy and growth factors in healing. It has been a privilege for us to work with the Malaysian Society of Wound Care Professionals and we see this event as pivotal in developing our reach to the Asian-Pacific region.

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