

Pressure ulcer survey seeks treatment opinions

The James Lind Alliance Pressure Ulcer Partnership (JLAPUP) is taking a survey to assess what research clinicians believe needs to be carried out in pressure ulcer treatment, care and prevention.

The questionnaire is seeking participants' opinions on how relevant specific treatment and prevention topics are for further

research. The questions are not evidence-based and do not have right or wrong answers. For example, if a question is raised about turning frequencies, it aims to find out how important research on that subject is to clinicians.

'We think it is vital that any further research into the prevention and treatment of pressure ulcers should focus on questions that are important to people with, or at risk of pressure ulcers, the people who care for them and the health professionals (doctors and nurses) who treat and help prevent these ulcers,' said Robert Morley, Project Support Officer.

To take the survey, visit: <http://www.jlapressureulcerpartnership.co.uk/>



Diabetic foot ulcers increase risk of mortality

In the most comprehensive study to date regarding the impact of the diabetic foot on mortality, researchers have found that patients with diabetic foot ulcers had a significantly increased chance of all-cause mortality than those without a history of the condition.

Patients with diabetic foot ulceration were found to have a significant increase in cardiovascular risk factors, including stroke and heart attacks, as well as all-cause mortality. The study assessed 3,619 events of all-cause mortality and found that there were an additional 58 deaths per 1,000 each year of patients with diabetic foot ulcers.

'Our research, which is the largest and, therefore, most reliable study to date, shows that people with diabetes who have foot ulcers are at

considerably higher risk of an earlier death compared to those patients without,' said Robert Hinchliffe from St George's, University of London. 'We suspect that this may be due in part to the effect of infections among those with foot ulcers and the greater co-existence of cardiovascular disease and foot ulcers with diabetes although the reasons are not entirely clear.'



NICE recommends trial for promising wound-healing device

The MIST™ Therapy system was recognised as a potential wound-healing system by NICE in 2011 and will begin trials on patients with leg ulcers to verify its nationwide adoption.

The therapy system uses a continuous saline mist, which delivers low-intensity ultrasound waves to the base of the wound. The ultrasonic energy encourages tissue regeneration and removes dead tissue and bacteria. Although there is not enough evidence to recommend the technology for its nationwide adoption yet, NICE believes it shows promise. This will be the first trial resulting from NICE recommendations that will generate evidence for medical devices and diagnostics.



'We're delighted to have received the go-ahead to start the trial on MIST, the medical device which may improve wound healing in hard-to-heal ulcers,' said Keith Harding, Chief Investigator, Wound Healing Research Unit, Cardiff University. 'There is a small amount of evidence to suggest that ulcers treated with MIST will heal more quickly than those having usual treatment; this trial will enable us to generate more independent evidence to show if this is actually the case. The results will then help NICE when it comes to review the original guidance, in deciding whether patients with chronic wounds would benefit from being treated using MIST.'

Image: Feet. Credit: Jason Cartwright on Flickr.

NICE releases guidelines for treating lower limb disease

New National Institute for Health and Clinical Excellence (NICE) guidelines have been released covering the diagnosis and management of lower limb peripheral arterial disease.

The guidelines, released earlier this year, are for clinicians treating patients aged 18 and older who have peripheral arterial disease. It requires clinicians to offer patients information, support and advice based on the severity of their condition. The guidance pinpoints specific steps in diagnosis and management techniques, such as measuring ankle brachial pressure index and offering supervised exercise programmes.

Visit <http://bit.ly/UIQ5tK4> for more information.

Podiatrists in the UK may acquire prescribing rights

It will now be easier and more efficient for patients to receive painkillers and anti-inflammatory medications due to a new act which proposes to give podiatrists and physiotherapists the right to give out prescriptions.

Health minister Lord Howe announced the potential legislation commenting that 'physiotherapists and podiatrists are highly trained clinicians who play a vital role in ensuring patients receive integrated care that helps them recover after treatment or manage a long-term condition successfully'.

Once trained and approved by the Health Professions Council (HPC), as well as annotated on the HPC register, UK podiatrists

and physiologists will gain this right.

'Independent prescribing provides podiatrists with the opportunity to deliver more flexible services for patients — ensuring timely access to medicines, care closer to home and enabling innovation,' said Alison Wishart, chair of the Society of Chiropractors and Podiatrists.



Image: The Choreography of Walking, by Ghislaine Howard. Credit: University of Salford on Flickr.

Documentary series focuses on prosthetic face surgery

A new documentary TV series, featuring the Maxillofacial Prosthetic Department at the Queen Elizabeth Hospital in Birmingham, UK, focuses on facial prosthetics and their role in bettering the lives of patients suffering facial injuries, illness or birth defects.

'Making Faces' follows a team of surgeons and prosthesis experts in the UK, highlighting treatment for some of the most

traumatic facial injuries in the country.

The documentary follows the team for five months, and features patients with burn wounds, cancerous tumours and violent assault. They help renew older prosthetics and build innovative realistic ones.

The department is the only one to work on facial reconstruction and prostheses with military patients and emergency cases in the UK.



Image: Surgeons at work. Credit: satimjadley on Flickr.

Oestrogen treatment aimed at older wound care patients

Research carried out at the University of Manchester, UK, is developing a way to introduce oestrogen treatment to assist in healing the wounds of older patients.

Studies have recently shown that oestrogen plays an important role in healing wounds, especially in older patients. Therefore, Age UK has given the University of Manchester Healing Foundation Centre a grant to develop an oestrogen cream to help wound healing.

'We knew that oestrogen was important in healing, but we didn't realise it played such a pivotal role,' says Dr Matthew Hardman, at the Healing Centre. 'Unfortunately, it's not safe to simply give people oestrogen as it has far too many side effects... we're looking to develop and test treatment options using compounds similar to oestrogen, but without the side effects that come with it.'

Wound care now normal for family caregivers

A recent report conducted by the American Association of Retired Persons (AARP) has shown that the role of family caregivers has evolved from household tasks to performing medical duties, such as wound care, which was once only provided in hospitals.

The report, entitled *Home alone: Family Caregivers Providing Complex Chronic Care*, reveals that now, more than ever, family caregivers are taking on an increasing medicalised role in home care, including tasks such as wound care, medication management and other nursing responsibilities.

More than a third of family caregivers in the US now perform

wound care tasks, including the application of dressings and administering prescription drugs, as well as treating pressure ulcers and post-surgical wounds. Almost 100% of family caregivers found wound care difficult due to the fear of making mistakes and causing harm to their loved-ones, not knowing exactly what to do, the fact that it takes time to care for a wound and also, that it may be emotionally difficult for the caregiver themselves.

Although woundcare training was provided by a hospital nurse, physician or a home care nurse, more than a third of caregivers felt that more training was necessary to ease their concerns about their wound care skills.

The report calls for professional terminology to be updated and for definitions of the role and tasks caregivers undertake in order to understand and support their work.

To read the report and visit the AARP website, visit: <http://bit.ly/AARPwoundcare> nownormalWINT



Image: Caregiving. Credit: ashpa on Flickr.

New tool to assess skin in hospitals

In an effort to eradicate pressure ulcer occurrence in hospitals, the PULSE system has been devised as an assessment tool to coincide with the SSKIN care bundle.

The SSKIN care bundle ties best practice with preventing pressure ulcers and minimises variation in care practices. The assessment tool, PULSE, has been developed to assist the SSKIN process.



The process of PULSE is:

- P** = Press reddened skin to check for blanching
- U** = Uncover the skin and remove TEDS and socks
- L** = Lift and check heels with a mirror
- S** = Search for redness on the sacrum
- E** = Evaluate elbows for redness.

Cards with this information, as well as outlining SSKIN, have been distributed to nursing staff in the UK as a means for preventing pressure ulcer occurrence in hospitals.

SNaP® Wound Care System now on UK Drug Tariff

Spiracur Inc is now included in the NHS Supply Chain Framework Agreement meaning that the SNaP® Wound Care System was included on the UK Drug Tariff as of 1 October, 2012.

The ultra-portable SNaP Wound Care System is a negative pressure wound therapy device, which uses spring technology to reduce air density and control how much negative pressure is carried to the wound bed.

'Because it is so small and portable, it allows our patients to carry on their

regular lifestyle during therapy,' said Ros Thomas, Deputy Head of Podiatry (ABM Trust) at Morriston Hospital in Swansea, Wales. 'Not only has quality of life for our patients improved during treatment with the SNaP System, clinical outcomes are excellent and we are seeing a reduction in costs as patients remain at their homes and not in hospital.'

The system has shown to help treat hard-to-heal lower-extremity wounds and reduces pain and exudate.



Image: NHS Supply Chain truck. Credit: diddygram on Flickr.

Free prosthesis trial for Paralympic-inspired amputees

Amputees who express an interest in taking up sport after watching the Paralympic Games will have the opportunity to trial a new prosthetic knee specifically developed for participating in athletics.

Otto Bock Healthcare, the official technical service provider for the 2012 Paralympic Games, has offered to loan out the new S380 prosthetic knee to encourage amputees who would like to partake in sports. Otto Bock intends to work with individuals and their physiotherapists to ensure the technology is fitted and used properly.

'People who see the Paralympics and think "I want to try running," will have a chance to see if they like the limb before they potentially end up with a white elephant in the corner of their living room,'



Image: Richard Whitehead. Credit: pixelblending on Flickr.

said John McFall, an amputee who competed for Team GB at Beijing 2008.

For more information, visit <http://www.ottobock.co.uk>.

Huddersfield University offers wound courses

The University of Huddersfield is proud to announce that the Tissue Viability and Wound Management and Management of Leg Ulceration courses, both at Master's level, are now available as online distance learning. Both courses commence in September each year and run for one year. On successful completion, students will be awarded 30 M-level credits for each course. Assessment is via a 2,000-word written assignment and completion of an online portfolio, and all potential students will need to identify a mentor in practice who will be able to support and guide them through the practical component of each course. Tutorials will be held via Skype for student support.

For further information please access the following links: <http://www.hud.ac.uk/hsc/cpd/cpdcourses/hmn1023/> <http://www.hud.ac.uk/hsc/cpd/cpdcourses/hmn1025/> or contact Dr Karen Ousey at: k.j.ousey@hud.ac.uk

'Controlling exudate and promoting healing of a chronic wound': correction

In an article in the last issue of *Wounds UK* entitled: 'Controlling exudate and promoting healing of a chronic wound,' we incorrectly labelled a series of photographs relating to a case study demonstrating the effect that ActivHeal Aquafiber®s (Advanced Medical Solutions) had on a category 3 pressure ulcer on the left heel. Initial presentation showed an extensive area of necrosis and slough, which was debrided using hydrogel to soften the tissue and sharp debridement to remove non-viable tissue.

The correct captions for the photos are as follows (see Figures 1 to 3):



Figure 1: Wound is sloughy with some necrotic tissue. Periwound skin is macerated. Commenced dressing with ActivHeal Aquafiber.



Figure 2: Evidence of autolytic debridement. Slough softening. Periwound skin less macerated.



Figure 3: Wound has reduced in size. Periwound greatly improved. Wound granulating. Slough reduced.