

# The RCT gold standard may be blinding us to the value of other research methods

John Timmons

The European Pressure Ulcer Advisory Panel conference is taking place in Bruges from 4th–6th of September and promises to be an excellent event. EPUAP attracts quality research from all over Europe and the core programme is presented by many top researchers and educators in the field.

Pressure ulcers have been a fascinating area of study for a number of years and they are still not fully understood. The field of pressure ulcer care in some ways is a microcosm of healthcare as a whole as it brings together nurses, doctors, dieticians, podiatrists, microbiologists, and creates a truly multiprofessional approach to care.

Anyone involved in the treatment of patients will appreciate that we face a number of challenges over the next few years. Of primary importance is the growing number of patients likely to suffer from pressure ulcers. This patient group has been steadily growing and will present a key challenge in the future.

Staffing levels are of key importance as without appropriate staffing levels, pressure ulcer prevention and management is unlikely to be of an acceptable standard. It is well documented that adequate staffing is necessary to ensure patients are cared for in relation to pressure area care and prevention. More pertinent is the reduction in the number of trained staff. There are still areas where there are no tissue viability specialists and other areas which underfund this speciality. In terms

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of education, audit, research and expert patient care there will be areas without specialist provision which may result in patients being at risk.

Economic pressure is always a consideration in healthcare, however, the cost implications of pressure ulceration cannot be ignored. The cost of prevention should not prohibit the provision of quality care, as the cost of the development of ulcers goes beyond financial realms. The true cost lies with the patient and their families, the increased time in hospital, pain, suffering and possibly additional surgery. It is difficult to imagine the emotions that a patient and their family will go through when they develop a pressure ulcer, and the problems they will face as a result.

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National procurement initiatives could be a double-edged sword. In striving to create savings for the NHS, there is a risk that the reduction in company budgets could lead to less research in an area which already suffers from a lack of sufficient research to help improve the care provided.

Evidence-based practice is part of the ethos of EPUAP and something that all clinicians should strive for. It is, however, a difficult area to study using the randomised, controlled trial (RCT) as the gold standard. The patients are so diverse and their physical conditions complex, which makes conclusions

difficult to reach. Strict inclusion criteria often serve only to exclude some of the very patients who will develop pressure ulcers. Despite this difficulty, there are a number of published papers which serve only to confirm the lack of sound evidence for practice. In particular are papers which question the value of risk assessment tools. They are, in some respects, an easy target, but having witnessed the implications which arise when areas are not using risk assessment I would support their use without question. The key with risk assessment is to use it in conjunction with clinical judgement and to ensure that the score leads to appropriate intervention.

While I agree that many aspects of pressure ulcer prevention and management require further research, I feel that some of the time and effort spent on carrying out analysis of this fact would be better spent on creating the evidence which we need to improve patient care. Such research should not purely focus on the high-powered RCT, but also on the physical and emotional impact on the patient and their families.

At the heart of improvements in pressure ulcer prevention and management is the need for education. From carer to specialist, there is a need to educate and translate research findings into workable policy. One of the goals of EPUAP is to meet the challenges of education across Europe, across disciplines and every individual who will care for patients at risk. September's conference will be another step towards this goal. **WUK**

*Wounds UK would like to congratulate Louise Stuart and Judy Waterlow for receiving MBEs in recognition of their contributions to healthcare.*