Meeting reports

19th European Tissue Repair Society (ETRS), 25–29 June 2009, Limoges, France,

This year's joint meeting of the Wound Healing Society and ETRS was held in Limoges, central France. The meeting was held in partnership with the Australian Wound Management Association, the Australasian Wound and Tissue Repair Society and the Japanese Society.

Around 300 delegates attended the conference from all corners of the globe, with the expertise varying from pure scientists to bedside clinicians.

The main theme of the conference was the role of stem cells in tissue repair. The opening plenary session examined the role of stem cells and their impact on all areas of medicine. This was followed by a paper examining the impact of diabetes on revascularisation in ischaemic limbs of rats. The findings in rat models showed that diabetes reduces the ability of stem cells to be attracted to the area in need of repair. Many of the papers discussed the different types of stem cells and those favoured, depending on the properties required.

Of most value in early studies on wound healing were the super mesenchymal cells, which produced excellent results in many clinical situations, including the treatment of radiation burns.

The young investigator sessions demonstrated a real commitment to this field. One of the most remarkable studies being the work of Tero Jarvinen of Finland, working in Santa Barbara, who has developed a technique for extracting peptides from bacteriophages, one billion peptides to be more accurate. By examining how these affected wound healing, he has identified peptides which are involved in tissue regeneration, and not simply in wound repair, which could revolutionise the way we treat wounds in the future.

One of the most interesting sessions centred around new therapies for

acute injury and trauma. Ceramic-based haemostat powders for battlefield injuries which soldiers can use themselves with immediate effect were discussed by a team of scientists from Richmond Virginia. Of more interest in chronic wounds, was the development of oxygen manufacturing dressings based on perfluorocarbons, which create bubbles of oxygen in the wound bed which has been shown to improve healing rates.

Among other notable topics were electrical current analysis in wound healing, transcutaneous oxygen pressure monitoring and nerve ending repair using Schwann cells.

This conference has a huge appeal. The work being done by the delegates is incredible. The only problem was that the conference was not well attended, and yet this work needs to be viewed and digested by everyone involved in wound care.

John Timmons, Tissue Viability Nurse,
Department of Tissue Viability, Grampian
Health Services and Editor, Wounds UK

12th European Pressure Ulcer Advisory Panel (EPUAP), 3–5 September 2009, Amsterdam

The I2th annual meeting of EPUAP was held at the Amsterdam Medical Centre (AMC) just outside the centre of Amsterdam. This was an interesting experience — to hold a conference in the main atrium of a large teaching hospital — it was fascinating to see patients wandering through and looking at the posters and the exhibition. It was also interesting to see how the clinicians reacted to the patients watching them!

The theme of the conference was: 'Pressure ulcers; not just a disease of the elderly — are your patients at risk?'

The first day started with excellent plenary sessions from two very different speakers, Val Irving focusing on the clinical care of neonates with pressure damage and Dr Matthew Hardman who reviewed the physiological differences in the skin of paediatrics and neonates which made

them more vulnerable to pressure ulcers and other types of skin problems. Other clinical areas which were addressed during the conference included patients with spinal cord injuries, patients with diabetes and patients requiring palliative care. There was a strong focus on providing an update on the basic science with a plenary session from Sandra Loerakker on the effect of intermittent loading on skeletal muscle damage, and four shorter sessions on basic science from scientists from across Europe. These brief sessions presented some challenging data which will hopefully be translated into clinical practice in the near future.

Following on from an extensive piece of collaborative working between EPUAP and the National Pressure Ulcer Advisory Panel (NPUAP), Carol Dealey and Katrien Vanderwee presented the final outcome of the International Guideline Initiative. This phenomenal piece of work has taken almost five years to reach fruition but can truly be said to be representative of international consensus, as not only did the main work occur between the European and American societies. but the output was also reviewed and commented on by, among others, the Japanese Pressure Ulcer Society and the Australian Pressure Ulcer Society.

Free papers covered a wide range of topics crossing clinical practice, education and science. Throughout the free papers, the focus on the broader patient group was clearly evident.

There was a comprehensive poster display addressing a range of topics. As always at EPUAP in recognition of the amount of work that goes into posters, a poster prize was awarded. EPUAP are keen to support the use of posters — often seen as being of less 'real' value than presenting a free paper.

The posters were judged by two members of the scientific committee and each winner was awarded a free place at the next EPUAP conference in Birmingham, 1st –4th September; 2010.

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The winning posters were:
'Management and prevention of pressure ulcers in neonates and paediatrics' by Maria Dolores Candela Zamora, Carmen Paterson Munoz Clinical Hospital, San Carlos Madrid, Spain; 'Incontinence management and pressure ulcer prevention: back to essentials using millennium technology' by Tracy Nowiki, The Prince Charles Hospital, Brisbane, Australia; and 'A framework of assessment of patients at risk of heel pressure ulcers' by Jacqui Fletcher, Department of Wound Healing, Cardiff University.

The main conference programme was well supported by four company symposia (KCI, Arjo/Huntleigh, Covidien and Danone), and a surprisingly well attended (for an 8.00AM start) breakfast meeting focusing on heel ulcers from EHOB.

The conference was well attended with 424 delegates from 24 different countries. The majority of delegates were from the Netherlands, UK, Belgium, USA, but there was a good spread of delegates from the rest of Europe and also as far away as Hong Kong and Australia.

There was an extensive exhibition with 21 companies, both international and from the Netherlands and there were also stands from four other collaborating organisations.

The traditional EPUAP dinner and dancing was missed this year (being in Amsterdam it was thought the delegates may wish to spend some time exploring the main city with its wealth of museums, galleries and canals), but an Indonesian buffet on the first night gave the delegates time to mix and socialise.

This was a conference with a real buzz. It was great to see people there who had not traditionally attended, as they felt that there was nothing relevant to their clinical practice area — this was particularly evident with the paediatric representation with children's

nurses being present from all over the world.

We look forward to seeing them again at the next EPUAP meeting in Birmingham, 1st—4th September 2010. Jacqui Fletcher, Senior Professional Tutor, Department of Wound Healing, Cardiff

Wounds UK Scottish Conference, 10 September 2009, Glasgow

Wounds UK would like to say a big thank you to the 400 delegates who travelled from across Scotland to make the 10th anniversary of the Wounds UK Scottish Conference an overwhelming success. Delegates travelled from as far north as the highlands, leaving at 5.00 AM and as far south as the borders.

Clinical expertise is continually challenged when assessing, diagnosing and finding the most appropriate and effective treatment to provide the best clinical outcome for the patient.

Presentations were made on 'Which bandage and why' by Margaret Armitage, Vascular Liaison Nurse Specialist, NHS Greater Glasgow and Clyde. Gillian Craig, Chronic Oedema Specialist, NHS Grampian, followed by discussing the management of chronic oedema in the lower limb. Barbara Page, Dermatology Liaison Nurse Specialist, Dunfermline. discussed the issue of continence dermatitis, which is certainly less common but still present in both adults and paediatrics and can often be very difficult to manage. Trudie Young, Lecturer in Tissue Viability, Bangor University, was asked to discuss controversial issues that clinicians routinely face – aseptic technique versus clean and tap water versus sterile solutions. The afternoon saw John Timmons, Clinical Manager, Wounds UK and Claire Acton, Tissue Viability Nurse Manager, St Thomas' Hospital, London discussing the use of topical antimicrobials and dressing selection. These presentations were supported by case studies which provided the audience with examples of wounds and how they can best be managed.

Delegates were also able to visit the large and extensive exhibition which provided clinical expertise, product samples and literature for all technologies involved in the maintenance of skin integrity and associated challenges and complications.

The day was a resounding success, with delegates, speakers and exhibition staff all returning home tired but happy for having shared an informative and clinically challenging day together:

Pam Cooper, Programme Director, Wounds UK

'Your Turn' comes to Walsall Hospitals NHS Trust. 8 October 2009

In October, the national Patient Safety First campaign was launched at Walsall Manor Hospital and the hospital also launched the 'Your Turn' pressure ulcer awareness campaign.

The 'Your Turn' campaign is central to the overall strategy adopted by the hospital to reduce the impact of pressure ulcers on the local population. Over recent months, the development and success of pressure ulcer incident reporting at the Manor has raised awareness of this issue both at a clinical and board level.

Officially launched by the Manor's Chief Executive, Sue James, at an event held in the outpatient department, 'Your Turn' campaign materials were available for patients and visitors throughout the day.

Richard White, Professor of Tissue Viability at the University of Worcester, was also on hand to lend his support to the event. Also in attendance was Brendan Devlin, Regional Sales Manager, of Huntleigh Healthcare — the providers of pressure-relieving equipment.

The Manor's tissue viability team and volunteers from the League of Friends handed out credit card size information cards to patients with the message 'Am I at risk?', and for staff, 'Is my patient at risk?'.

In another bid to raise awareness, members of the public were encouraged to enter a competition about how to prevent and identify pressure damage. Over 70 people participated with many more speaking to the team about wound care.

The campaign launch was also supported by a link on the homepage of the hospital's intranet site to the tissue viability page. The automatic screen saver on all hospital PCs now also displays the 'YourTurn' logo.

The weekly Chief Executive update sent to all staff groups highlighted the campaign and will continue to do so as it is rolled out across the trust. Over the next four months, several events, ward displays and competitions are planned to keep the campaign in the forefront of people's minds.

The impact of the campaign will be measured with benchmarking exercises, and a review and root cause analysis (RCA) of pressure ulcer incidents. The hospital also plans to further develop the quality dashboards and implement the new 'passport audit', from Huntleigh Healthcare.

This project has been developed as a joint venture involving the tissue viability team, the quality and value unit (Clinical Governance), the director and heads of nursing, the communications and marketing team, the League of Friends, Your Turn campaign advisers and commercial partners. All have seen the benefits and would recommend colleagues nationally to adopt and become involved with 'Your Turn'.

'Your Turn' is seeking national support for mandatory reporting of pressure damage from members of the public and healthcare organisations. An online petition is available at: www.yourturn.org.uk.

For more information about the experience at Walsall Manor

Hospital, please contact Helen Shoker, Lead Nurse for Tissue Viability, or the Communications Team via the switchboard on 01922 721172.

Helen Shoker, Lead Nurse for Tissue Viability, Walsall Hospitals NHS Trust

Smith & Nephew 'Quality Care For All' workshops, with Springboard Consultancy

Clinical and non-clinical skills are both required to provide a quality service in wound care. Smith & Nephew Healthcare has understood and embraced this by setting up a series of workshops offering development in this area. Non-clinical sessions including project management, assessing change in clinical practice and understanding the national healthcare drivers and policies are tackled during the workshops.

The days start with John Davis from Springboard Consultancy, who reviews current and future changes to national NHS structures and their implications on wound care. The agenda that is set offers clinicians who attend the opportunity to discuss and debate the most up-to-date healthcare policies.

In order for tissue viability to raise its own awareness and profile, a full understanding of where it fits into the national healthcare agenda is vital.

Breakout sessions throughout the day offer the delegates the chance to share practical examples of quality wound care services and the metrics needed to assess this.

All the workshops delivered so far this year have been well attended and highly evaluated.

The structure of the workshops will be continued into the New Year and adapted to focus on the true need of all wound care clinicians.

If you are interested in attending one of these workshops, please contact: Richard Shorney, Professional Development Manager, Smith & Nephew Healthcare, email: richard. shorney@smith-nephew.com.

Richard Shorney, Professional Development Manager, Smith & Nephew Healthcare

Integra Roadshow, 30 September 2009, City of Manchester Stadium

Wounds UK and Integra hosted an event to introduce nurse specialists in tissue viability to the skin substitute, Integra™. The day was chaired by David Gray, Wounds UK Clinical Director, who opened with a short overview of the issues facing the NHS today. The next speaker, Janice Bianchi of Glasgow Caledonian University, covered aspects relating to working with competencies, extended practice and ethical/legal issues, introducing the audience to the principles governing advanced practice in the UK.

The purpose of skin grafting and the role of skin substitutes was presented by Steven Jeffery, Consultant Burns and Plastic Surgeon, Selly Oak Hospital, Birmingham. This session provided an insight into when and where these products might be used and when a skin graft may be preferable. An overview of the use of skin substitutes in clinical practice was also given.

Adeshir Bayat, Clinical Scientist from Manchester, allowed delegates to view a series of cases where skin substitutes had been used in conjunction with a number of modern treatments. The final presentation was given by Lesley Street and Lynette Spain, Clinical Nurse Specialists in Burns and Plastic Surgery, Selly Oak Hospital, Birmingham. They discussed the topic of postoperative nursing care of Integra, demonstrating the clinical benefits associated with effective post-application management.

The day gave an insight into the potential that this treatment has in the field of tissue viability and ensured that the delegates left the event pondering how such a therapy may become part of their practice.

David Gray, Clinical Director, Wounds UK