



WMAI

Wound Management
Association of Ireland

Quarterly Newsletter

Promoting Best Practise in Wound Care



Volume 8 Issue 5 June 2013

Dear Members and Colleagues.

Welcome to our June issue of WMAI newsletter.

This issue features many articles and reflections from some of our members who participated in this year's European Wound



Management Association (EWMA) Conference in Copenhagen. It was great to see so many Irish colleagues delivering both oral and poster presentations disseminating research and the great work currently in progress in Ireland. Indeed, this was also a great opportunity to network with other European wound organisations through the cooperating organisations meeting (see update in this issue).

There is a growing recognition across Europe of the impact that chronic wounds have upon the lives of individu-

als and the importance of providing them with effective wound care services. However, there is still much to understand about all aspects of wound healing and management and great opportunities for research both here in Ireland and in collaboration with our European colleagues. Therefore, I would urge our members to avail of the WMAI bursary's this year.

On a final note we are looking forward to the National Conference in Cork this year. The final programme looks very exciting and covers a wide range of topics relevant to all areas of practice. Thanks to those who have submitted poster/presentation abstracts. Following evaluation by our Scientific Committee, successful applicants will be notified in early July. Register early to secure your place!

Julie Jordan-O'Brien, WMAI President

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EWMA News

CO-OPERATING ORGANISATION'S BOARD MEETING 2013 UPDATE

The cooperating organisation board meeting took place on Thursday 16th May at the European Wound Management association (EWMA) meeting in Copenhagen. The meeting was chaired by Dr Zena Moore (EWMA Immediate Past President) who outlined the agenda and the objectives for the organisation. The main objectives of the board meeting were to:

- × Provide an opportunity for the Cooperating Organisations as well as for the EWMA Council and Secretariat to share questions and opinions regarding the cooperation.
- × Elect two members for the EWMA Council
- × Networking between European wound management associations

Dubravko Huljev gave feedback on the project activities currently in progress over the past year and some information on the next EWMA conference which will take place in Madrid Spain.

Sebastian Probst gave a presentation of the EWMA Home Care Wound Care project and the possibilities of involving the cooperating organisations.

A couple of group debates took place to discuss

1. How can the Cooperating Organisations contribute to the EWMA Home Care Wound Care Project?
2. How can the Cooperating Organisations contribute actively to driving the Patient Safety agenda across Europe?

The results of these debates were fed back to the group and the information will be collated by EWMA secretariat to present at European Union in Brussels to raise awareness of wounds and the patient safety agenda.

The meeting concluded with the election where Arkadiusz Jawien (Poland) and Knut Kroger (Germany) were elected to the EWMA co-operating organisation council



The 23rd Annual Conference EWMA Copenhagen – A Personal Reflection

I would like to acknowledge with thanks the funding from WMAI that enabled me to attend EWMA 2013 in Copenhagen in May. Attending the conference enhanced my professional development and was a great experience to find myself amongst a diverse worldwide wound care community. The conference theme of *organisation and co-operation* was reflected in many of the presentations, posters and workshops. Very early on in the proceedings, the importance of professional collaboration through multi-disciplinary teamwork was highlighted in wound care. The programme was full and varied, and I found it difficult to choose which presentation to attend. I would like to share some of my personal highlights with you.



During the opening session, a short video was played as part of the Danish Patient Safety Group presentation. The video delivered a poignant message to all delegates and focused us the most important person in any care situation - the patient. The visual images provided us with a powerful message. The video is entitled 'Empathy; The human connection to patient care'. Please click on the link to view, it is well worth watching http://www.youtube.com/watch?v=cDDWvj_q-o8

I gained an insight into situations a world apart from the Irish community health, for example, in providing healthcare in resource-poor countries and in the aftermath of natural disasters. The experience of emergency aid health workers in Haiti following the aftermath of the earthquake disaster in January 2010 was riveting. From the simple logistics in setting up a space to assess patients, to keeping 300 negative pressure units charged makes one think of the huge challenges. Having adequate and sufficient resources also means that aid workers need to possess certain knowledge and skills such as the importance of regular re-positioning in post-operative patients to prevent pressure ulcers. It is difficult to appreciate that having access to simple basics such as sterile water or sterile gauze can be a luxury.

I was very interested to learn more about the emerging technologies in e-health and hearing new evidence from studies that measured patient outcomes, cost, patient satisfaction and effectiveness via changing the organisation and delivery of care. I found myself reflecting back to Ireland and considering E-Health as a realistic option for clinicians and patients alike. An e-clinic

could benefit patients living in remote/isolated areas as well as busy urban districts across Ireland. Changing the point-of-care dramatically alters the patient journey in every sense - experience, reduction of travel expenses, transport and waiting time. For example, a study from Sweden highlighted increased patient satisfaction with a telephone support system following hospital discharge. Food for thought...

Two new EWMA documents were launched at the conference; 'Debridement' and 'Antimicrobials and Non-Healing Wounds'. These provide an update and excellent resource for clinicians (see link on our WMAI website). The related symposiums afforded me the opportunity to up-date my knowledge levels and generate further discussion at my work place. I am looking forward to the *Home care wound care* document planned for release at EWMA 2014 because it relates to my current work setting.

Again, my thanks to WMAI for funding me to attend EWMA 2013; it was a valuable professional experience. I really enjoyed the conference and met many interesting people from all aspects of wound care. Having the opportunity to meet and discuss issues with internationally recognised wound care experts was definitely a highlight of the conference. Their generosity in sharing knowledge and experiences made the experience all the more valuable. It was re-affirming to hear the new ideas and advancements in wound management that still acknowledge the patient as the focus for improving health outcome.

Kate Arkley, Community RGN, BNS(Hons), Pg. Dip. Wound Management & Tissue Viability, MSc., Nursing Specialist practice. WMAI Western region-Secretary

Eimer Shanley, Public Health Nurse in Cork; Julie Jordan O'Brien, Tissue Viability CNS, Beaumont Hospital and WMAI President; and Fiona Concannon, Community Tissue Viability Nurse in Dublin at the 2013 EWMA Conference in Copenhagen in May





What's New in Research

Trends in Incidence of Lower extremity amputations in People with and without diabetes over a five-year period in the Republic of Ireland

Buckley, C., O'Farrell, A., Canavan, R. et al (2012) PLoS ONE 7(7): e41492. www.ploseone.org

Report by: Dr. Georgina Gethin

Using the Hospital In-Patient Enquiry (HIPE) system this study aimed to determine the incidence of lower limb amputations in persons with and without diabetes in Ireland and to compare these rates with International data. The HIPE system collects information on the day and in-patient discharges from the acute public hospitals in Ireland.

The data period was 2005 – 2009 inclusive. During this time 2,776 patients underwent non-traumatic lower limb amputation in the Republic of Ireland. Of all of these, 1654 (54.5%) occurred among people with diabetes. The total number of diabetes related amputations increased from 144.2 per 100,000 populations in 2005 to 175.7 per 100,000 in 2009. This increase was not statistically significant. Major diabetes related amputation rates remained steady during this period while minor rates increased.

The mortality rate during hospital admission among persons with diabetes was 6.4%. The median length of hospital stay was 24 days. The risk of an individual with diabetes undergoing an amputation was 22.3 times that of an individual without diabetes in 2005 and did not change significantly by 2009.

Comment: This is an important study as it aims to provide baseline data for future comparisons and allows us to bench mark Irish data with international data. The results from Ireland are broadly in line with international trends and in particular with the United Kingdom. It remains of concern that the risk of amputation for those with diabetes is 22.3 times higher than for those without diabetes but the increase in minor amputations may be due to early intervention. The launch of the clinical care programme for diabetes and roll out of national foot assessment programmes should further influence these rates as we would hope to see earlier interventions to avoid amputations but also to reduce the level of amputation for the individual.

A cluster randomised trial of the leg ulcer prevention programme (LUPP) in venous leg ulcer patients within an Irish Community Care Setting

Emer Shanley, Zena Moore *Royal College of Surgeons in Ireland (Dublin, Ireland)*

Aim: The aim of this study was to determine the effects of a Leg Ulcer Prevention Programme (LUPP) on patient's knowledge of, and attitudes and behaviours towards, leg ulcer prevention within the Irish community care setting.

Method: The research design employed was a multi-centre, cluster, randomised controlled trial. Participants had attended the nurse-led clinic in the previous twelve months and had a history of venous leg ulceration. Participants (n=51) were divided into two groups: the control group received "usual" care, the intervention group, participated in the education programme. A pre and post-intervention evaluation was conducted to examine any statistical differences between the groups. Data were analyzed using descriptive and inferential statistics as appropriate.

Results: There was no statistical significant difference between groups regarding baseline knowledge. Post-LUPP the knowledge score of the control group was lower, whilst there was a statistically significant improvement in the knowledge score of the intervention group ($p < .001$). The proportion of correct answers for the intervention group increased statistically significantly in nearly every case. Findings also showed improved healthy behaviours, attitudes and self-management practices.

Conclusions: The findings suggest that LUPP has a positive impact on patients' knowledge of venous leg ulcer prevention. The writer proposes the implementation of an education program within the Irish Healthcare setting for the prevention of recurrence. Further research is necessary to study effects in longer term.



GEARING UP FOR CORK 2013

FULL PROGRAMME NOW AVAILABLE FOR THE 12TH NATIONAL WOUND MANAGEMENT CONFERENCE

Thanks to all those who have submitted abstracts for presentations and posters for consideration for Cork 2013.

Final date for submission of posters/abstracts has passed. A scientific committee will evaluate all abstracts and successful applicants will be notified by e-mail on or before **Friday, JULY 5th 2013**. Abstracts and researcher(s) details will be printed in the conference proceedings (exactly as submitted on this application). Winners will be announced and prizes awarded at Conference Close of Proceedings on October 2nd.

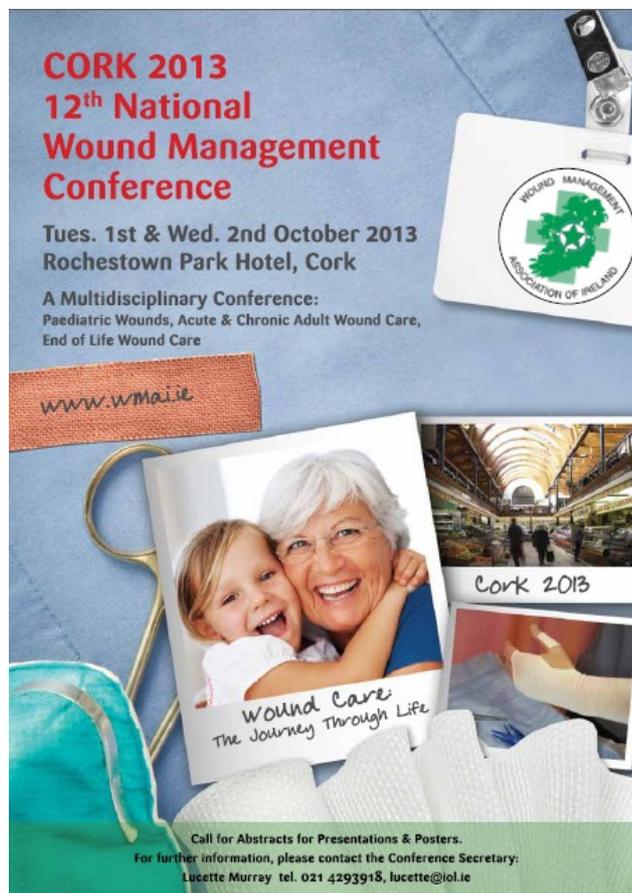
See wmai.ie for registration form, full programme and accommodation options

(Presenters must also register for the conference)

Topics to be covered during the conference include:

- ✓ Paediatric Wounds
- ✓ Acute Wounds
- ✓ Obstetric wound care
- ✓ Wound Infection
- ✓ Pressure Ulcer
- ✓ Diabetic Foot
- ✓ Ethics in Wound Care
- ✓ End of life Wound Care.

The Opening Address will be given by Dr. Maura Pidgeon,



EWMA Publish Document on Antimicrobials

The EWMA Document *Antimicrobials and Non-healing Wounds Evidence, Controversies and suggestions* can now be downloaded free of charge

via the EWMA website (www.ewma.org)

The overall aim of this document is to highlight current knowledge regarding use of antimicrobials, particularly in non-healing wounds, to discuss what still is controversial and give suggestions for future actions.

The Antimicrobial document was officially presented by the authors in a Key Session at the EWMA 2013 conference in Copenhagen in May.

April 2013 edition of the EWMA Journal is now available to download from the EWMA website.



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E-MAIL US AT OFFICE@WMAI.IE

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