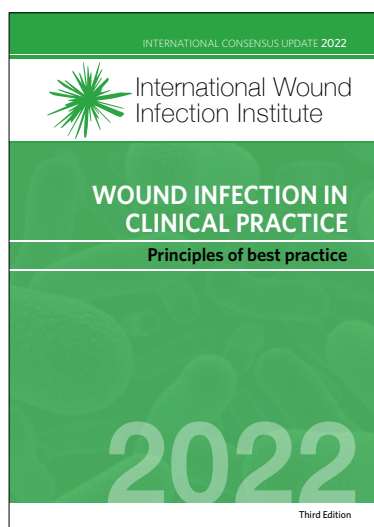


## BOOK REVIEW

# Wound infection in clinical practice

Title	Wound infection in clinical practice
Author(s)	International Wound Infection Institute (IWII)
Publisher	Wounds International
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The updated *Wound infection in clinical practice* consensus document incorporates 15 separate segments within a well-structured framework. It presents graphics as a method of re-emphasising important learning points. For example, Figure 1 is an example of this clear presentation strategy with the delineation of the five conceptual stages of wound infection

outlined. A potentially useful adjunct, which may have assisted in this, could have been clinically-based photography highlighting the visual appearance of wounds reflective of these stages of wound infection. The consensus document utilises tables which, while they may be cumbersome in regards to quantity, are easily comprehensible. A further adjunct which is noted throughout the document is the utilisation of 'practice points' to highlight the applicability of the information provided within a practitioner's day to day practice.

The document comprehensively covers the topic of wound infection in clinical practice. It clearly outlines the terminology utilised in this setting so as to allow readers to subsequently engage in the breakdown of this subject. The quality of the *Identifying and assessing infection in a wound* segment must be highlighted as it clearly and succinctly educates practitioners in regards to appropriate diagnostic strategies while also referencing wound infection assessment tools (i.e. ASEPSIS, IWGDF/IDSA System, etc) which may be utilised in clinical practice.

The document is well referenced throughout. This is specifically evidenced by Tables 12–16, in the segment *Topical antimicrobial therapy*, where a detailed breakdown of the evidence base is provided with a compartmentalisation

of the evidence ranking into 'high certainty', 'moderate certainty', and 'low and critically low certainty'. There is also a focus upon future strategies in *Wound infection science and practice* for both diagnosis and management. It clearly highlights the rapidly developing evidence base that is occurring in this field.

This document provides clear and informative material that is relevant for novice, intermediate and advanced practitioners in wound care. For the beginner, the 'practice points' are a specifically useful adjunct, while the depth and breadth of the main text allows for the informative education of all three of these sub-groups. Overall, the greatest benefit would likely be apparent in the intermediate group as they look to advance their daily practice from a position of moderate expertise.

In conclusion, the updated *Wound infection in clinical practice* consensus document successfully communicates the clinically relevant material to practitioners in this area. The manuscript is well referenced throughout, allowing readers to further examine the available literature. A potential area for future enhancement of this consensus document would be the addition of clinical photography/wound images so as to allow the association of word-based description with visual cues. Aside from this, the document successfully delivers the education of practitioners, no matter their level of clinical expertise.