Editorial

Diversity leading to excellence

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In this the final issue of Wound Practice and Research for 2017, you will find an eclectic mix of articles with hopefully something for everyone who has an interest in wound management and research.

Our goal at Wounds Australia, and for the journal, is to provide an inclusive and trustworthy source of information which will help advance best practice in wound care and management through awareness raising, advocacy and knowledge sharing. Our success depends on the continued contribution of those who are willing to share their knowledge and experiences with colleagues in the field of wound care.

We begin with a detailed review by Katherine Sahin and colleagues of the cells that regulate inflammation. They explain the role of the macrophage; that on one hand is vital for a healthy healing response but on the other hand can be so detrimental to the healing of chronic wounds.

From macrophages we move to a more holistic approach to wounds and the important area of caregiver wellbeing. Katherine Rich describes a survey of caregivers who look after people with wounds and how their subjective wellbeing is much lower than the general population in Australia. Understanding more about the factors that affect caregivers will help to inform clinical practice not only about the patient but about the person who has the task of looking after them.

Effective pressure redistribution is the focus of the article by Gavin Brealey and colleagues who describe their pilot study investigating the effectiveness of different cushions for reducing interface pressure depending on chair surfaces. They conclude that the surface of the chair has a major influence on the performance of pressure redistribution cushions and suggest this needs be taken into consideration when prescribing pressure redistribution equipment.

We then return to an interesting review by Natalie Stevens about the issues and challenges of delivering drugs and therapies directly to a wound rather than by oral or systemic injection. Direct delivery may lead to reduced side effects, reduced costs and fewer side effects but are not without their challenges.

Wendy Jannings presents a fascinating case study about a patient with spinal cord injury who presented with an ischial tuberosity and calcified material in the wound bed. Using a holistic approach Wendy describes the patient’s journey towards a healed wound without surgical intervention.

Finally Joleen McArdle and her team from far north Queensland describe their trial to identify the most effective dressing for haemodialysis catheter exit sites in the tropics. Their study highlights the difficulties encountered working in tropical climates and provides evidence regarding dressing choices.

The breadth of articles in this issue just highlights the amazingly diverse field of wound management and I hope you enjoy reading them as much as I have putting them together.