

EDITORIAL

# The complexities of managing an ever-growing problem of chronic wounds

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**For referencing** Tehan P, Kopecki Z. The complexities of managing an ever-growing problem of chronic wounds. *Wound Practice and Research*. 2025;33(1):4.

**DOI** <https://doi.org/10.33235/wpr.33.1.4>

Welcome to the first issue of *Wound Practice and Research* for 2025. Inside this issue we continue to focus on an ever-growing problem of chronic wounds covering the breadth of work that wound clinicians and researchers encounter, and we hope this issue will inspire you to look at your own clinical practice and research endeavours.

This issue starts with an important consensus study by Finlayson and colleagues, presenting the findings of a Delphi survey of Australian multidisciplinary expert chronic wound practitioners and researchers. This consensus study redefines the priority topics for chronic wound research in Australia. The complexity of managing chronic wounds was clearly evident in this study with an extensive range of research priorities encompassing prevention and management of chronic wounds in Australia. Key priority topics identified include pain management, venous leg ulcer compression therapy and pressure injury management while diabetic foot ulcers and pressure injury care comprised the greatest number of priorities agreed upon by the experts for the prevention and management of chronic wounds in Australia.

A scoping review by Pennisi and colleagues, highlights another important concept in chronic wound management that is the pressing need to focus on including patients in chronic disease management frameworks to prevent venous leg ulcer recurrence. This study emphasises that a multidisciplinary approach with community integration and a shift in language and focus is required to advance venous leg management, asking wound practitioners to challenge the current approaches.

Continuing on the topic of chronic wounds prevention, an original research study by O'Connor and colleagues, describes the prevalence and common risk factors for development of chronic lower limb oedema in the older populations. This work highlighted the importance of early detection for initiating timely intervention to reduce the risk of complication and chronic wound development that further diminish the quality of life and independence of this vulnerable population. On a similar note, an interesting case study by Astrada, describes the utility of ultrasonography

in early detection of subcutaneous scarring caused by persistent oedema following the healing of infected diabetic foot ulcer. This suggests that early recognition through imaging can guide timely intervention and appropriate management strategies to mitigate functional impairment associated with subcutaneous scarring.

For those interested in pressure injuries, a study by Kruschwitz and Probst, focuses on the importance of managing exudate during pressure injury treatment. Authors describe the retrospective analysis of case series in a German outpatient clinic, demonstrating the use of multipurpose dressing to maintain optimal moisture balance, promote healing and prevent infection resulting in a marked reduction in wound area.

Finally, we present an interesting WHAM evidence summary by Hulsdunk and Haesler, discussing the evidence for use of low-level laser therapy for healing of venous leg ulcers.

We hope you enjoy this latest issue of *Wound Practice and Research* and we look forward to receiving your submissions for future issues.