

Editorial

A breadth of wound issues

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Welcome to the first issue of *Wound Practice and Research* for 2019. Inside this issue you will find a selection of articles that cover the breadth of work that wound clinicians and researchers encounter and hopefully there will be something that sparks a thought or a conversation around the coffee table or in the tearoom.

The article by Sharon Boxall and co-authors includes studies that investigated the issues associated with patient concordance with compression bandaging with issues identified relating to knowledge deficit; resource deficit; psychosocial issues; pain/discomfort; physical limitations; and wound management issues. Given that compression bandaging is recognised as the gold standard for the management of venous leg ulceration, developing screening tools to identify patients at risk of non-concordance will be important to maximise healing of patients with chronic venous insufficiency and venous leg ulcers.

For those interested in pressure injuries, the paper by Monica Stankiewicz and co-authors will be of particular interest. Here they report on a cluster-controlled clinical trial of two sacral dressings used in the Australian intensive care setting for sacral pressure injury prevention. Their findings and recommendations include the use of sacral prophylactic dressings for at-risk patients, with the choice of product based on ease of application, clinician preference and overall cost-effectiveness of the dressing.

The case study by first time author Sara Coombes gives us a fascinating insight into the issues that affect wound management in a rural setting where access to community

podiatry and high-risk foot clinics are limited or non-existent. Here she outlines that private practitioners need to develop their own multidisciplinary teams to provide the wound care required to treat their patients and provides evidence for this through the care plan developed in her case study.

Wound-related pain is a major issue for people suffering from chronic lower limb wounds. The article by Nikki Frescos provides a timely review of current assessment tools to monitor and assess pain levels in people with chronic limb wounds. This scoping review identified four common pain measurement tools however none were supported by sufficient evidence to allow their recommendation for assessing pain in lower limb wounds. This highlighted the fact that further studies are required to enable clinicians to monitor and assess pain in their patients.

Finally, we take a long overdue look at cadexomer iodine a staple tool of many wound care clinicians. David Brett takes us through the history of iodine, from its first discovery in 1811 through to its current use as an effective antimicrobial agent particularly when in its cadexomer form.

I hope you enjoy this issue of *Wound Practice and Research* and that these articles inspire you to take a look at your own clinical practice and/or research endeavours.

Professor Allison J Cowin
Editor Wound Practice and Research

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