

## *Is it time to examine the focus of our research efforts in wound management through the lens of the three R's*

Chronic wounds are a major global cause of morbidity, and mortality is significantly increased in patients with a history of diabetic foot ulcer (DFU).<sup>1</sup> Patients with venous leg ulcers (VLU) often report at least one co-morbidity, with hypertension being the most prevalent, and when matched by gender and age, they have a higher level of comorbidity than their counterpart.<sup>2</sup> The management of these complex patients requires a multidisciplinary approach with research focused towards better patient outcomes and ensuring that the evidence base needed to advance their care is developed.

If one were to view research in the field of wound care, we could reasonably do so through the lens of the three R's: reducing occurrence in the first instance; promoting remission and the prevention of recurrence. However, the literature reveals an unequal balance among the three R's and, with the exception of pressure ulceration (PU), there is a heavy emphasis on the treatment of open wounds. A review of the Cochrane Wounds Database since January 2020 supports this. Of the 15 reviews published, eight were on PUs, one was on VLUs, two were on DFUs and four focused on other aetiologies. Of these, 75% of PU reviews focused on prevention; one DFU review focused on both treatment and the prevention of recurrence and one review was on treatment alone. Of the protocols published, seven were on PUs and three were on other aetiologies. Of those on pressure ulceration, 85% were focused on prevention. Thus, in the domain of the prevention of occurrence or primary prevention, pressure ulceration has a very strong prevention focus, while in all other areas the focus is on treatment, with only one review focusing on the prevention of recurrence.

The above point, of course, is only a superficial glance at the current literature, as it only considers systematic reviews of interventions and thus excludes other areas of research. However, it does give us a starting point upon which to reflect on the current focus of our research. The question, therefore, remains: Are we too focused on the management of open wounds, at the expense of prevention of onset and recurrence? Research in any of these domains must consider the complexity of the human spirit as it reveals itself across the disease spectrum. It is therefore reassuring that, in this issue of the Journal of Wound Management, there is a strong focus on the patient, with articles included on wellbeing, personality and mood and health belief theories. We need research from all perspectives supporting a multidisciplinary approach to what should remain our first goal: to prevent a wound in the first instance, and thus reduce occurrence.

*Professor Georgina Gethin*  
Editor

### REFERENCES

1. Sen, C.K., Human Wounds and Its Burden: An Updated Compendium of Estimates. *Adv Wound Care* (New Rochelle), 2019. 8(2): p. 39-48.
2. Kelly, M. and G. Gethin, Prevalence of Chronic Illness and Risk Factors for Chronic Illness Among Patients With Venous Leg Ulceration: A Cross-Sectional Study. *Int J Low Extrem Wounds*, 2019. 18(3): p. 301-308.