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EMBEDDING THE INTERNATIONAL SKIN TEAR ADVISORY PANEL'S SKIN TEAR CLASSIFICATION INTO PRACTICE

The International Skin Tear Advisory Panel (ISTAP) developed a classification system for skin tears in 2011¹. Following this a study was undertaken to establish the validity of the system in clinical practice². This study showed that the ISTAP classification was easy to use for practitioners in different clinical settings and also in different countries. Subsequently a larger validation study was carried out in 2019 across 44 countries and involving 1601 participants³. The conclusion of this research was that the classification system is supported by evidence for validity and reliability, with the recommendation that this should be the system of choice for the systematic assessment and reporting of skin tears in clinical practice and research globally.

The ISTAP Skin Tear Classification System categorises skin tears into Types, with Type 1 being a linear or flap skin tear with no tissue loss, Type 2 involves partial flap loss (where the flap cannot be repositioned to cover the wound bed) and Type 3 indicates complete flap loss (Figure 1).

The first aid measures to follow when a skin tear does occur is to, first, stop the bleeding and then, gently cleanse the wound to remove any debris. If a skin flap is present this should be reapproximated to cover the wound bed and then the skin tear should be classified using the ISTAP Skin Tear Classification System⁴.



Figure 1 ISTAP Skin Tear Classification System

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ISTAP President

The classification system is now available in 14 other languages other than English, being Arabic, Czech, Dutch, French, Hebrew, Japanese, Spanish, Chinese, Danish, German, Italian, Portuguese, Swedish and Turkish (skintears.org). ISTAP has had the pleasure of supporting and working with colleagues in these countries to aid in the translation process and advise on implementation.

The next steps in developing the ISTAP classification system is to ensure it is validated in different populations with different skin tones as we recognise that the current system reflects how skin tears appear in predominantly white Caucasian skin. This is where ISTAP needs your help! We would welcome opportunities to collaborate with colleagues to create a repository of images of skin tears in different skin tones. We would also encourage anyone seeking to validate the ISTAP classification in different populations, particularly in groups with different skin tones, to contact us (info@skintears.org) for support with this.

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