

Improving Education in Wound Care

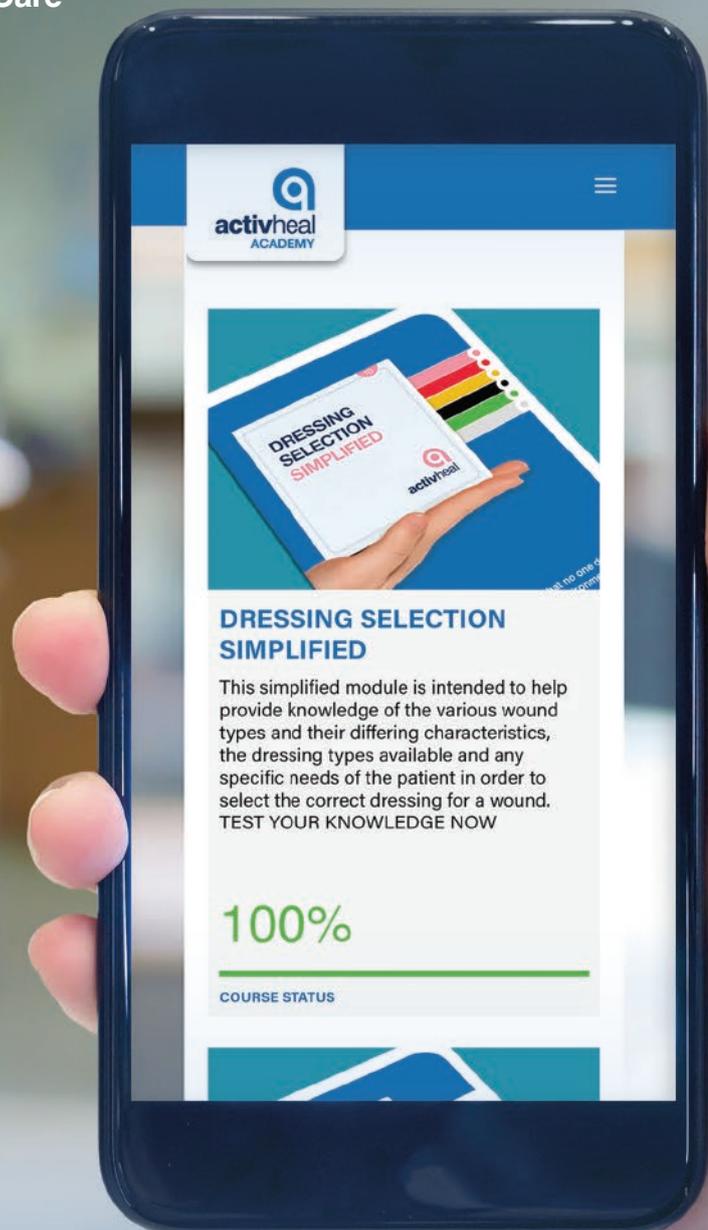
Wound Care Education in the Spotlight

Counting the Cost of Wound Care

The Role of Education in Wound Care

Clear and Present Danger: The Rise of Antimicrobial Resistance

The Past, Present and Future of Wound Care



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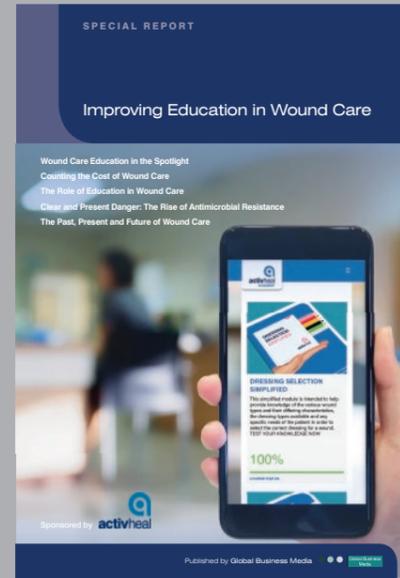


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Foreword

Around 4.5% of the population is living with a wound at any one time in the UK and this has a significant social and economic burden. Indeed, as we'll see in this report, the cost to the NHS of treating wounds is comparable to that of managing obesity. However, with better education and a greater focus on wound care, this could change.

In our opening article, we hear from Advanced Medical Solutions on the challenges facing wound care and how they are trying to improve this with their ActivHeal® range and by focussing on education to address this.

Through its ActivHeal® brand, Advanced Medical Solutions have looked at how their training platform

can provide an affordable way to improve the understanding of front-line staff, as well as help them pursue continuous professional development (CPD).

Where education is lacking, costs are likely to rise. Our next article examines the true economic impact of wound care. Reports suggest this is £5.3bn, but even so, it is only now that health services are beginning to give wound care the dedicated attention it deserves.

As Jo Roth argues, it's all about education. Training budgets have been slashed, and opportunities for ongoing professional development are limited. The result is that the quality of care is inconsistent across the healthcare system. A typical care pathway often

falls some way short of the ideal, which means wounds continue to fester and refuse to heal. The solution lies in affordable and accessible forms of education which can give clinicians working on the front line, the skills they need to ensure all patients can expect the best standard of care.

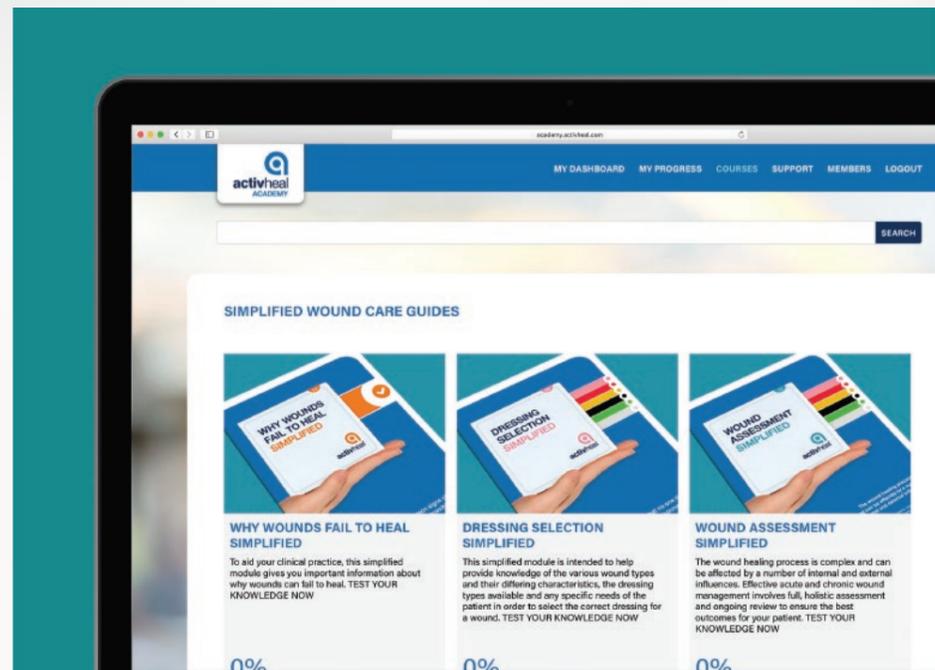
Another problem caused by a lack of education is antimicrobial resistance. A failure to develop new antibiotics means diseases are developing a resistance, whilst poor antimicrobial stewardship sees patients regularly being unnecessarily prescribed antibiotics. Raising awareness about alternatives such as antiseptics and

improving general wound care knowledge will see clinicians develop a much more intelligent and sustainable approach.

Our final article looks at the future of wound care. Technology means this space is evolving rapidly. Smarter dressings and mobile technology all help improve outcomes for patients, but this also puts the focus on education and ongoing training. The landscape is changing, and education will help clinicians keep up.

Tom Cropper
Editor

Tom Cropper, has produced articles and reports on various aspects of global business over the past 15 years. He has also worked as a copywriter for some of the largest corporations in the world, including ANZ Bank, ING and KPMG.



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Wound Care Education in the Spotlight

Advanced Medical Solutions Group PLC

A lack of continuous professional development is hindering the treatment of wounds and increasing the drain on resources.

Whether it's during initial training or as part of their professional development, clinicians are not receiving adequate training in wound care

WOUND CARE costs as much as cancer and takes up an enormous part of a medical professional's daily routine. Its impact on NHS resources is enormous, but it receives surprisingly little attention. While there have been improvements in recent years, thanks to initiatives such as the National Wound Care Strategy, the wider health sector still overlooks one area consistently: education.

Whether it's during initial training or as part of their professional development, clinicians are not receiving adequate training in wound care. As a result, quality of care can vary enormously with patients bearing the brunt of the consequences. If their wounds are not treated effectively, they can find themselves requiring extensive ongoing treatment. It has a profound impact on their health, lifestyle and wellbeing, much of which could be avoided with better care.

Time to Focus on Wound Health

The lack of a clear strategy and adequate training can have a significant impact on both healthcare resources and the quality of care. It is no secret that the NHS has come under growing financial pressure over the last few years. Total planned spending for the Department of Health is approximately £124.7 billion in 2017/2018, which includes £335m of additional funding announced in the 2017 Autumn budget^a.

Although funding has grown year on year, it lags behind historical trends and inflation. In real terms, the Department of Health Budget will grow on average by 1.2% between 2009/2010 and 2020/2021^b. In contrast, the average increase in health spending since the establishment of the NHS has been 4%. According to the Office of Budgetary Responsibility, a 4.3% increase is necessary to maintain standards at current levels.

In reality, the NHS is experiencing cuts against what it has received previously, the rate of inflation and future needs. These financial pressures all come at a time when the NHS faces a serious problem of recruitment. According to the Kings Fund, the NHS employs 1,000,000 people full

time, with around 30% being nurses and health visitors, however, the health service is increasingly struggling to fill positions. The Kings Fund points to problems such as a high turnover with a shortfall of around 100,000 vacancies, which equates to one in eleven positions. This could rise to almost 250,000 positions by 2030^c.

These financial and staffing pressures make effective wound care all the more critical but also make it harder to achieve. Staffing pressures can lead to mistakes and a lack of attention to detail which in turn increase the strain on resources.

The cost of this is just beginning to become apparent. An Open Article from the BMJ found that the NHS spends £5.3bn on wound care, only slightly less than cancer at £5.6bn^d. However, with much of wound care taking place in the community, it is difficult to assess the true level. What is clear, though, is that poor wound care has a serious impact on the wellbeing of patients and NHS resources.

Pressure ulcers, for example, are frequent but, with proper prevention techniques, are perfectly avoidable. If they are not managed correctly, they can lead to unnecessary readmissions and additional costs through negligence claims.

A recent request to the NHS Litigation Authority under the Freedom of Information Act has identified the cost of claims for clinical negligence associated with pressure sores from April 2010 to April 2015 at just under £19 million, with the cost of claims in the 2014/15 tax year alone exceeding £7.1 million for 172 successful claims^e.

Poor wound care also leads to problems with patients suffering from lower limb or foot ulcers and diabetes as a paper by Guest et al. finds. Most patients with diabetes received care in the community, and only 5% had seen a podiatrist or received a pressure offloading device. Of these, 14% were documented as having a clinically infected wound with 31% of patients being prescribed an antimicrobial medical dressing at the initial assessment, which means as many as 45% of diabetic foot ulcers



THE TRUE COST OF WOUND CARE IS JUST BEGINNING TO BECOME APPARENT WITH THE NHS SPENDING £5.3BN ON WOUND CARE, ONLY SLIGHTLY LESS THAN CANCER AT £5.6BN.

were considered at risk of infection. Venous leg ulcer patients, the report found, were also mainly cared for in the community, however, as many as 30% of venous leg ulcers may have been clinically infected at the time of management.

Antimicrobial Resistance

Better wound management is also an important factor in the battle against antimicrobial resistance. No new antibiotics have been developed over the past 25 years and poor antimicrobial stewardship is leading to a rise in antimicrobial resistant bacteria, which has a significant impact on resources. Unless things change, current antibiotics could be rendered useless in the next two decades. In this post antibiotic world, we face nothing less than the end of modern medicine as we know it. A simple infection could once again become fatal.

In relation to wound care, studies suggest antibiotics are often needlessly prescribed as part of the wound care process. One UK study finds that one in five prescriptions given out by the NHS are to patients who do not need them^f. As the study from Filius et al. suggests, better wound management will be important in avoiding the development of resistant bacteria, along with a better knowledge of the criteria and causative effects of infections^g.

"Knowledge of the criteria for wound infections, the causative pathogens and their prevailing susceptibility patterns, is a prerequisite for the rational prescribing of antimicrobials. Since the benefits of wound debridement and wound irrigation have been proven, prescribing antibacterials should not usually be the initial treatment strategy in the management of infected wounds," states the Filius report.

Antiseptics can be effective at killing harmful microbes but do not lead to a corresponding increase in resistance. Common antiseptics for

wound care include iodine, silver, PHMB, honey and enzymes, but there is still work to be done to understand how they should be used.

Clinicians will need a better understanding of which antiseptics are suitable for wound care, how their use can be monitored, what levels should be applied and used in dressings and the difference between antibiotics and antiseptics.

The Need for Better Education

A common thread runs through all these issues: a need for a greater focus on wound care and better education at all levels.

The National Wound Care Strategy provides the focus. It aims to offer recommendations which improve how patients are assessed, treated and monitored. It tries to reduce the variation in standards across different health services, to improve the speed of delivery and availability of products and services for wound care and to provide access to education for healthcare practitioners, carers and patients.

It is that last point which we feel is so important, because developing effective education is a challenge. Wound care is predominantly the provision of nursing, but this does not always have powers to introduce change across the whole healthcare system. Budgets for education and training have been slashed, which means it is difficult to deliver real improvements in awareness and understanding.

An Educational Platform

Access to free wound care education is something we have been keen to address with the ActivHeal® brand. In May this year, we launched the sixth edition of our Wound Care Education Pocket Guide. This 156-page booklet is small enough to carry with you wherever you go and is packed with useful information about wound care.



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The financial and staffing pressures make effective wound care all the more critical but also make it harder to achieve. Staffing pressures can lead to mistakes and a lack of attention to detail which in turn increase the strain on resources



THE ACTIVHEAL® POCKET GUIDE TO WOUND CARE IS NOW IN ITS SIXTH EDITION. THIS COMPREHENSIVE GUIDE IS SMALL ENOUGH TO FIT IN YOUR POCKET AND PACKED WITH USEFUL INFORMATION.

However, for more formal training we've launched our ActivHeal® Academy, which gives clinicians the opportunity to access training resources and offers an affordable way to develop knowledge and skill. The ActivHeal® Academy is a free multi-tiered training resource which comes in two forms.

- 1. How to Simplified Guides:** Our Simplified Guides are split into nine education modules. They are short, concise and can help clinicians in their day to day activities. They are available both online and in hard copy and are continuously renewed to ensure access to the most up to date information is available. We will continue to expand the range of Simplified Guides which is available by looking at new areas where education can enhance care.
- 2. University-level modules:** Our advanced courses support Continuing Professional Development covering topics including skin

anatomy and physiology through to wound healing and dressing selection. Access to the higher tiers is restricted to ActivHeal® customers to ensure they receive full support when using the ActivHeal® range of products.

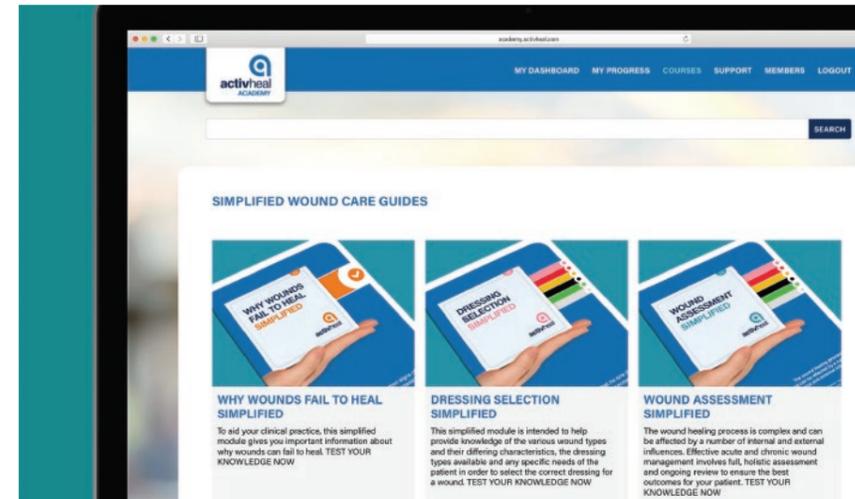
Customers can get access by either registering online or speaking to local Account Executives.

When using the Simplified Guides, users can quickly take a multiple-choice test. If successful, they will receive a certificate which can be added to their profile. If not, they can retake the test. Each user can track their progress from their dashboard. In addition, it will also allow for reflection statements to be completed to align with the CPD requirements.

Managers and designated group leaders can view the progress of their team from a central dashboard. They can see who has completed which tests and export that information into a spreadsheet.



THE ACTIVHEAL® ACADEMY PROVIDES ACCESS TO A MULTI-LEVEL WOUND CARE EDUCATION PROGRAMME COVERING A RANGE OF TOPICS FROM BASIC SKIN ANATOMY AND PHYSIOLOGY THROUGH TO WOUND HEALING AND DRESSING SELECTION AIMED AT SUPPORTING CONTINUED PROFESSIONAL DEVELOPMENT (CPD).



ACTIVHEAL® SIMPLIFIED GUIDES ARE AVAILABLE UPON REGISTRATION AND CAN BE VIEWED ONLINE OR DOWNLOADED. FOLLOWING THE COMPLETION OF A SHORT TEST AND REFLECTION STATEMENT TO BE COMPLETED, A CERTIFICATE OF ACHIEVEMENT IS AVAILABLE TO DOWNLOAD AND PRINT TO SUPPORT CONTINUING PROFESSIONAL DEVELOPMENT.



WOUND CARE EDUCATION IN THE PALM OF YOUR HAND. THE ACTIVHEAL® ACADEMY PROVIDES FREE ACCESS TO ONLINE EDUCATION RESOURCES ON YOUR MOBILE OR TABLET DEVICE.

The problem with education is finding the time and money to provide it. The ActivHeal® Academy is a quick, simple and affordable way to build knowledge of best practice amongst

clinicians. It is a way to deliver on the goals of the Wound Care Strategy: of reducing inconsistency of service provision, increasing the focus on wound care as a discipline and improving the awareness and confidence of clinicians. The ActivHeal® Academy also makes it easier for professionals to gain access to Continuing Professional Development.

This could prove to be the big game-changer. Yes, there have been plenty of initiatives to manage budgets and quality of care for wound care, but education appears to be the one area where the system is still inadequate. The need for a standardised approach is paramount as currently care may differ from region to region and the Wound Care Strategy should help to deliver this. Our team at ActivHeal® is striving to develop a best in class, multi-tiered education Academy that will support clinicians of all levels.

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Counting the Cost of Wound Care

Tom Cropper, Staff Writer

Chronic wounds have an enormous impact on patients and health service budgets, so why does wound care not receive the same attention as other areas of similar financial impact to the NHS?

The future of healthcare is marked by one major challenge: how can health services continue to deliver world class improvements

IT HAS become a national obsession. Every week, we see news bulletins warning us about how much a particular issue is costing the NHS. However, what often goes overlooked is the cost of wound care, which is thought to amount to more than £5bn¹. This is enormous, so why doesn't it get more attention?

The Financial Challenge

The future of healthcare is marked by one major challenge: how can health services continue to deliver world class improvements? The Kings Fund estimates that the NHS will need £24bn by 2022 to avoid a worsening in care standards and lengthening treatment times². A study by Jansen finds that by 2030 spending on healthcare could have grown to 14% of GDP, up from 8% in 2000³. The Lancet predicts global healthcare spending to increase to \$15 trillion, accounting for 9% of the global economy by 2050⁴.

This growth is driven by a combination of improved medical technology and an ageing population. New technology widens the scope of what can be achieved, but also the cost. An older population means more people require long term, complex and expensive treatment. According to the UN, the number of people over the age of 60 doubled between 1980 and 2017 to 962 million. By 2050, it is expected to double again⁵.

Spending at the current rate, therefore, is unsustainable. Health services face the prospect of cutting back and risk a deterioration of care. In March 2019, life expectancy in the UK fell by six months according to the Institute and Faculty of Actuaries. Although they declined to comment on the cause, they said the drop was large enough to indicate a trend rather than a blip. Other analysts were quick to pick up on austerity and cuts to the NHS⁶.



HTTPS://WWW.KINGSFUND.ORG.UK/PROJECTS/NHS-IN-A-NUTSHELL/NHS-BUDGET

Annual cost of NHS resource use

Cost attributable to managing 2.2 million patients with a wound and the % increase in spend, compared to managing 2.2 million matched controls¹



1. Guest JF, Ayoub N, McIlwraith T, et al. Health economic burden that wounds impose on the National Health Service in the UK. BMJ Open 2015;5:e009283. doi:10.1136/bmjopen-2015-009283. Available at: <http://bmjopen/content/5/12/e009283.full>

How to Save Money

An alternative is to spend smarter and to identify unnecessary causes of cost and waste as well as ways of improving patient outcomes and quality, within the existing resources we see today. One of the biggest areas of waste is wound care. A study from Julian Guest et al. found that wounds pose a substantial health burden on the NHS comparable to that of managing obesity (£5.1bn). Wound care, it found, was a predominantly nurse-led discipline and 30% of wounds lacked a differential diagnosis which they said indicated practical difficulties experienced by non-specialist clinicians.⁷

Another study puts the burden of wound care at £5.3bn with surgical wounds and leg ulcers being the most expensive to treat. The annual cost of wound care incurred by the average CCG, it said, was £36.6million and this is predicted to rise to £55.7 million by 2020⁸. The bottom line, states the report, is that the cost of wound care is already substantial, but is growing rapidly.

So how can this be resolved? Again, this report found that many wounds did not receive a diagnosis. Wound size and status were not recorded and treatment plans were not put into place. Ensuring wounds are properly treated and that patients are referred to the appropriate specialists therefore is one key step moving forward. The report asserts that a wound which heals properly costs the NHS approximately £800 to treat while one which doesn't cost

around £4,500⁹. In addition, those patients who have a wound are also shown to have significantly higher morbidity levels.

Another is prevention. A document from NHS England takes a fictitious patient called Betty and compares a flawed but not unusual care pathway with an ideal scenario¹⁰. At each stage, it compares the cost to health commissioners. Throughout the process, we see her visit her local GP, receive wound assessments and, eventually, visits from community nurses. Different clinicians prescribe different bandages and dressings whilst some apply them incorrectly. For example, she is given compression bandages, which are so painful that she removes them herself at night. Guidelines are not followed, and community teams are often stretched thinly struggling to manage their workload.

It takes two years to adequately heal, during which time she suffers from a loss of confidence and identity as she works to hide the wound and manage its healing. Here we see the true costs of sub-optimal wound care demonstrated vividly. It comes not only in the direct costs to health services but in the impact on the lives of patients. It is all the more frustrating because, as we'll see throughout this report, the technology and capabilities exist to change this.

A More Optimistic Future

There is good news. Authorities are now aware of the need for better wound care. The National



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Authorities are now aware of the need for better wound care. The National Wound Care Strategy includes calls for a better focus on wounds as an issue in itself as well as more funding and training



Wound Care Strategy includes calls for a better focus on wounds as an issue in itself as well as more funding and training. It comes about as a result of other initiatives in Government such as NHS England's Leading Change, Adding Value Wound Care Project (2016) and discussions in the House of Lords (2016 and 2017), shows authorities are looking at the matter.

Change can come slowly, but there are things Trusts can do to improve their own wound care

strategies. They can ensure clinicians are given the very best formal and informal training to improve their knowledge, they can stay up to date with the latest developments in wound treatment and they can develop more effective pathways which ensure patients are seen more quickly by the most appropriate clinicians. By doing so, they can reduce the strain on their budgets whilst also improving the lives of their patients.



National Wound Care Strategy Programme

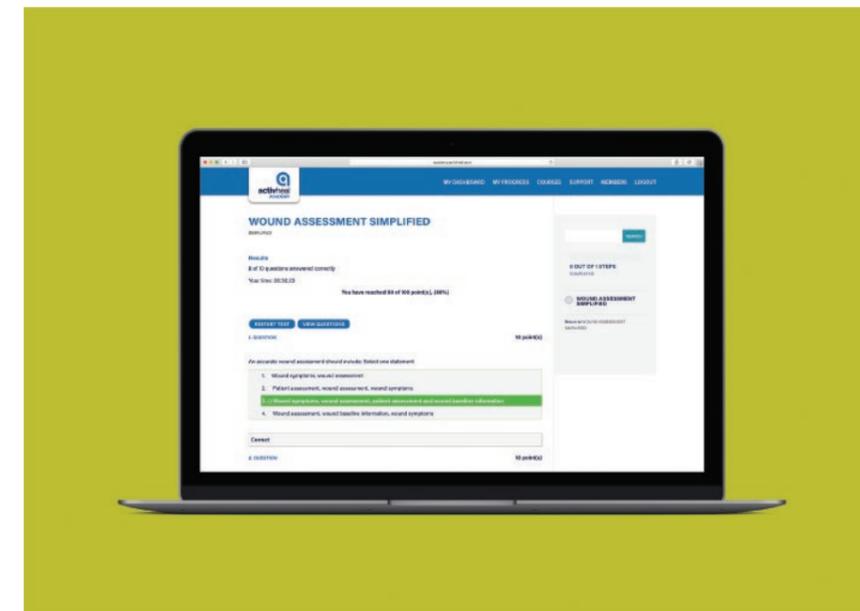
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An alternative is to spend smarter and to identify unnecessary causes of cost and waste as well as ways of improving patient outcomes and quality, within the existing resources we see today. One of the biggest areas of waste is wound care

The Role of Education in Wound Care

Jo Roth, Staff Writer

Better education and more opportunities for continuous professional development can improve the outcomes for patients living with chronic wounds.



DESIGNATED GROUP LEADERS CAN TRACK THE PROGRESS OF THEIR TEAM'S TRAINING FROM THEIR DASHBOARD WITH RESULTS AVAILABLE TO EXPORT IN A SPREADSHEET FORMAT.

AROUND 2.8 million people in the UK are living with chronic wounds¹¹. The impact on their working and social life can be profound, and the cost of ongoing care high. Even so, the NHS has struggled to improve the way it cares for patients with wounds. Now, though, things are beginning to change with the arrival of the National Wound Care Strategy and other initiatives. Will it be enough, and what can be done to improve treatment?

A Lack of Focus

Part of the problem stems from the fact that wounds do not have their own position within the NHS. Instead, they are a part of the overall treatment process for almost every other specialism. Because of this, as a paper from William J Ellis states, 'there is no formal training process in place for clinicians to train and certify'¹².

As the paper highlights, wound care has experienced a host of scientific advances over the past 20 years. From an environment in which wound dressings were the only therapeutic

option, he writes that 'the wound clinician now has an arsenal of dressings, biological tissue replacements, gene therapy and cell-based treatment options.' However, training has not kept pace, and that leads to inequalities in the quality of care across the health service.

At the same time, funding is in short supply as a report by the National Institute for Health Research (NIHR) confirms. Whilst assessment of wounds in the community and ongoing professional development are both crucial to the provision of adequate wound care, the budgets for both have been slashed. The report also identified areas of variation across the North of England¹³. The Parliamentary Health Committee has called on Health Education England to reverse previous cuts to budgets for continuous professional development¹⁴.

Better Training

The problem is twofold. Although the field of wound care is evolving and there is tremendous scope for improvement, it faces significant



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As so often is the case, the solution lies in technology. New training platforms harnessing online, video and mobile technology are delivering high quality training at a lower cost to NHS trusts



THE ACTIVHEAL® ACADEMY IS A FREE MULTI-TIERED EDUCATION PLATFORM DESIGNED TO SUPPORT CLINICIANS OF ALL LEVELS WITH EASILY ACCESSIBLE, ONLINE EDUCATION RESOURCES.

barriers in the shape of funding and focus. The question now is: how can we achieve all those potential improvements?

There is some movement in this regard with the establishment of the National Wound Care Strategy which aims to improve the management of wound care across England. It represents a recognition on the part of the authorities that they need to develop a focused, consistent attitude to the care of wounds.

To do this though they will also need to improve the focus on training, both at the start of the career and through continuous professional development (CPD). The Royal College of Nursing has developed a fresh set of principles outlining what best practice in CPD should look like. It includes the following five principles which state CPD should:

- Be each person's responsibility and be made possible and supported by employers.
- Benefit service users.
- Improve the quality of service delivery.
- Be balanced and relevant to each person's area of practice or employment.
- Be recorded and show the effect on each person's area of practice.¹⁵

"By setting out what staff and employers should expect, these principles will help develop the knowledge, skills and competencies that lead to an effective workforce prepared to deliver high-quality care," said Gill Coverdale, RCN Lead for Education. "These principles come at an important time, as CPD budgets have been cut 80% in the last two years. As demand rises and patient needs change, it is vital the Government invests in developing our

health care workforce to meet the challenges of the future."

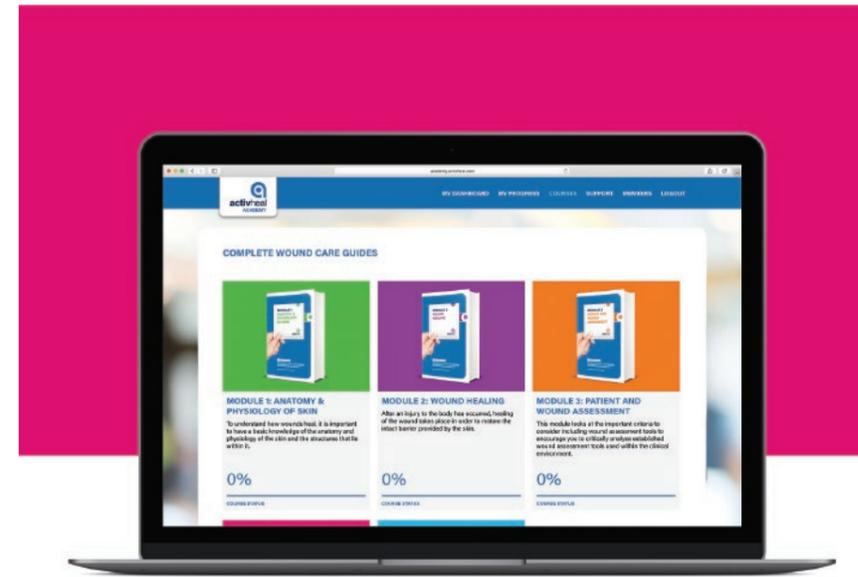
Affordable but Accessible Solutions

As it so often does, it comes down to investment or lack thereof. Increased focus and better training would, of course, be beneficial, but here's the problem: if training is limited at the start of a career, and funding for education is short supply, how can clinicians get the training they need?

As so often is the case, the solution lies in technology. New training platforms harnessing online, video and mobile technology are delivering high quality training at a lower cost to NHS trusts. This can have enormous implications for wound care education as one company, Advanced Medical Solutions, through its ActivHeal® brand is showing. To address the problem of wound care training, they have developed a platform to provide education to clinicians at all stages of their career.

The platform is a free multi-tiered education solution providing the right education level for all clinicians, from foundation stage through to the higher modules. University level material that is made available online, whilst the foundation platform is available both in online and in hard copy to support the continuous professional development of front-line staff. It covers everything from basic anatomy to dressing selection and wound control.

The Academy includes a huge amount of content including guides, university level modules and online tests, reflective learning and certificates which can better educate clinicians in all aspects of wound care.



FROM THE THE ACTIVHEAL® ACADEMY DASHBOARD YOU CAN ACCESS FIVE COMPREHENSIVE WOUND CARE MODULES COVERING A RANGE OF TOPICS INCLUDING WOUND ASSESSMENT, MANAGEMENT AND DRESSING SELECTION.

In addition, the ActivHeal® Academy also has a special focus on antimicrobial stewardship to ensure clinicians have greater confidence about when it is the right time to use antibiotics or antimicrobial dressings.

This platform can plug an important gap in wound care by delivering the kind of ongoing professional development which has previously been missing. It helps clinicians to understand best practice, provide greater insights into wound care and keep up to date with the latest developments in medications and dressings. Importantly, it provides specialist training, focused on wound care.

Things, then, are changing. The health service has, albeit somewhat belatedly, realised the importance of wound care. As new treatments are developed, then, there is every reason to be hopeful about the future.

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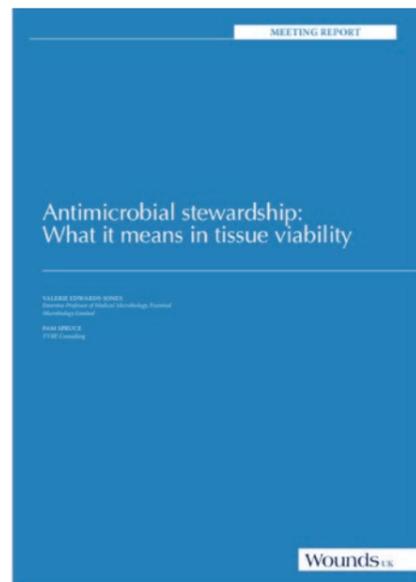
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Clear and Present Danger: The Rise of Antimicrobial Resistance

James Butler, Staff Writer

With no new antibiotics being developed within the last 20 years, we face the real risk of a post antibiotic age. Antimicrobial strategies in wound care will be crucial to prevent this in the future.

So, who's to blame? For many, the finger is firmly pointing at the pharmaceutical companies. Despite many positive statements, the development of new drugs has ground to a halt



IT IS perhaps a sign of the times that expert analysis, which so often sounds dry and reserved starts to sound somewhat post-apocalyptic. Take, for example, the recent Intergovernmental Panel on Climate Change report which gave us ten years to save the planet¹⁶. In the medical world, it comes when people talk about the dawning of the post antibiotic age and the 'end of modern medicine' as we know it¹⁷. Welcome to the dark times.

It's an alarming statement, but it is based on cold scientific evidence. No new antibiotics have been developed in the past 25 years. Already, Médecins Sans Frontiers warns that antimicrobial resistance is on the rise all around the world¹⁸. Both the UN and World Health Organisation have described it as a global crisis, and current antibiotics could be rendered useless within the next two decades. The result? Diseases which

can now be cured easily could once again become fatal. Health services will struggle under the pressure as conditions which were once treated easily, require ongoing and intensive care.

For a sector which has become used to continual and unstoppable improvements, this is something of a wakeup call. For the first time in centuries, the quality of care could fall. Our ability to fight disease could be diminishing and people, inevitably, will start to die earlier.

This is not a new phenomenon. Indeed, the first case of antimicrobial resistance occurred more than a hundred years ago. Now though, it threatens to alter the very fabric of healthcare delivery.

Fighting Back Against Antibiotic Resistance

So, who's to blame? For many, the finger is firmly pointing at the pharmaceutical companies. Despite many positive statements, the development of new drugs has ground to a halt. Governments have alternated between a carrot and stick approach. For the stick, we look to a report from Lord O' Neil of Gatley, which recommends penalising companies for pulling out of drug development¹⁹.

The carrot comes from the UK's Health Secretary, Matt Hancock, who signalled that the Government could incentivise pharmaceutical companies to develop new drugs. Speaking at the World Economic Forum, he announced that antimicrobial resistance should be treated as a global health emergency. Work was scheduled to start to reduce the number of drug-resistant infections by 10% by 2025²⁰.

Unfortunately, they all run into a big problem in the form of money. Drug companies have a duty to their shareholders and developing new drugs is expensive. The recent decision of Achaeon, a company dedicated to developing new antibiotics, had to file for bankruptcy. This



shows that it is not necessarily the most profitable of businesses²¹.

Antibiotic Misuse

The will is there on all sides. Drug companies say they intend to step up development and Governments are working harder to nudge them in the right direction, but that in itself is only part of the solution. Antibiotic misuse is rife, and it's putting the entire system at risk.

Antibiotics have often been used as the standard way to kickstart the healing process in non-healing wounds. A study showed that 50% of hospitalized patients receive at least one antibiotic during their hospital stay, with an estimated 20% to 30% of inpatient days of antibiotic therapy considered unnecessary²².

Poor adherence can also be a problem. When antibiotics are prescribed, they are not always taken correctly. When this happens, bacteria are exposed to an antibiotic giving them the chance to develop resistance but are not killed off completely allowing them to pass that resistance down.

Similarly, when the same antibiotics are administered time and time again, bacteria can start to build up a resistance. Over-use of the same antibiotic with individuals will see their effectiveness decline over time.

What Can Be Done?

It is clear that the over prescription of antibiotics has contributed to an increase in antimicrobial resistance. Reducing the use of antibiotics could have helped to reduce the spread, but so too could smarter use such as combination

therapy. A 2017 study into the use of antiseptics in antimicrobial stewardship strategies studied synergies between antiseptics and combined use antibiotics and where their combined use could help. It found that antiseptics played an integral part in antimicrobial strategies and that innovation and a willingness to increase knowledge would be important in encouraging their further use²³.

Antiseptic dressings are now more widely available and may be used as an alternative to antibiotics. However, there are still significant barriers. A lack of best practice guidelines means their use is left down to the individual clinician's decision making. In many cases, clinicians will instinctively stick with what they know and feel to be the simplest option.

To address the issue, a form of best practice guidance would help clinicians to decide when to prescribe antiseptics or to use combination therapies. Equally, further training in wound care will help to combat the inappropriate prescribing of antibiotics. As a position paper on antimicrobial stewardship in wound care states, all wounds will be colonised by bacteria, but only those which are clinically infected will need antibiotic therapy²⁴.

There is work to be done. Education in wound care will be important, but dedicating time and effort to this is not straightforward. Whilst it consumes a significant part of a clinicians' daily workload, wound care is all too often overlooked. The result is the prescription of antibiotics often looking like it is a knee jerk reaction. Attempts at an effective antimicrobial stewardship strategy will always rely on effective education for individual clinicians.



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The Past, Present and Future of Wound Care

Tom Cropper, Editor

Technology can revolutionise wound care in the future, but clinicians will still need to make the best use of it.

There was a time when clinicians had to make do with basic standard dressings, but things are changing. Today, they have access to a wide range of advanced dressings which have a number of advantages over traditional methods such as gauze and tape

THE LAST few decades have witnessed an unprecedented explosion in medical technology. Today's health services have an ever-widening arsenal of weapons to bring to bear in their ongoing fight against disease. However, as we look to the future, it risks running into something of a brick wall. Technology has expanded our capabilities, but it has also increased costs. Resistance to antibiotics is growing, which leaves us facing some unpleasant truths. In the future, diseases might become immune to our most effective drugs and advanced treatments might not be affordable. Whenever we look at future developments in wound care, it is always with these two barriers in mind.

Overcoming the Financial Challenge

First, the bad news. As we've covered elsewhere in this report, the cost of wound care is surging. Budgets for acute and community care and the training requirements have been slashed, and clinicians are struggling to cope with their workloads. The result is that many patients are requiring ongoing, intensive and expensive forms of treatment.

Now, the good news: there is a host of new technologies coming onto the market which can reverse this trend. They can improve the ability of care teams to properly address wounds, they can reduce the number of people needing ongoing care, and they can even help in the fight against antimicrobial resistance.

Advanced Dressings

There was a time when clinicians had to make do with basic standard dressings, but things are changing. Today, they have access to a wide range of advanced dressings which have a number of advantages over traditional methods such as gauze and tape. However, some of these can be more effective than others and clinicians aren't always certain which one to choose. The sector needs more evidence-

based guidance about the clinical effectiveness of available dressings.

A comparative study attempts to shed some light by comparing Advanced Medical Solution's advanced high-performance dressings (Aquafiber Extra) reinforced with non-woven felt against most conventional dressings composed of Carboxymethyl cellulose (CMC)²⁵.

The ActivHeal® Aquafiber Extra is designed to offer superior features including high gelling, high absorption, good wet and dry strength and low lateral wicking. Researchers studied it for all these properties and found the following:

- **Absorbency:** Aquafiber Extra has an absorption capacity 47% higher than the market leading CMC dressing.
- **Dry strength:** Dry strength was 91% higher than the market leading CMC suggesting it will stay intact during wear and on removal.
- **Wet Strength:** When wet, the Aquafiber Extra was 96% stronger than the market leading CMC.
- **Lateral wicking:** This is important as it contains liquid within the point of application and prevents it spreading. The tests found the Aquafiber Extra to have 24% less lateral wicking than CMC and 4% less than CMC reinforced. The Aquafiber Extra also showed integrity over eight days, suggesting it will remain intact for the intended wear time. In conclusion, the report found that the Aquafiber Extra had equal or superior performances to CMC and CMC reinforced across all metrics.

The Future of Antimicrobial Dressings

Antimicrobial dressings have recently become more common. These advanced dressings are loaded with antimicrobial elements to reduce wound bacterial colonisation. The number of different antimicrobial dressings used has increased rapidly over the past few years. Iodine and silver are the most common, but researchers are also looking at other agents, including Polyhexamethylene biguanide (PHMB), chitosan and honey. However, as the number



increases, clinicians may struggle to feel certain about which antimicrobials should be used in which situations.

As we move further into the future, education will need to keep pace with the development of technologies. Authorities will need to establish clear guidelines and advice about their use and clinicians will have to work hard to stay informed of the latest developments. Advanced Medical Solutions, through its ActivHeal brand, have tried to address this with a decision-making algorithm to position where each technology should be considered.

Keeping up with the latest developments could potentially be tricky as the pace of change is picking up. Advanced technologies such as artificial intelligence (AI) nano technology and virtual reality could all come to the fore as wound care becomes much more technologically advanced. We're entering a world of smart dressings and bandages in which clinicians can benefit from real time reports on the wound environment and their progress with healing.

Dressings and bandages are getting smarter with technology embedded within them to report on the condition of chronic and non-healing wounds. It may be able to deliver drugs and monitor the wound environment alerting clinicians to any changes in the condition of the wound. In theory, we may enter a future in which AI technology monitors and can assess the condition of the wound and recommend treatment pathways. Each clinician could have real time information on a patient's condition

displayed on a desktop computer, allowing them to quickly and simply adjust.

Virtual reality (VR) and augmented reality (AR) may also make their presence felt in wound management. The first step would be AR in which computer images can be overlaid on the physical world, allowing clinicians to view the projected trajectory of a wound. VR training simulations could also provide a more realistic training experience.

Smartphone technology and telehealth are already making it possible to improve engagement with patients in the community. They can reduce the cost of care and deliver faster and more accurate reports supporting clinicians in the decision-making process.

Understanding the Future

Much of this may turn out to be science fiction, but it is the way medicine is going. Many people may bristle at the thought of what impact this might have on jobs, but although some will be lost others will be created. There will always be a need for skilled professionals to oversee the provision of care. It is simply that technology will change the way people work.

If things go well, it will improve productivity and enable clinicians to provide effective care to more people. Of course, if it doesn't, it may end up wasting a whole lot of money. The future is unwritten. It will need to be a combination of innovation, understanding and more importantly education to ensure advanced technologies have a positive impact.



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