SELECTED PAPERS OF INTEREST

1. **An exploration of fourth-year undergraduate nurses’ knowledge of and attitude towards pressure ulcer prevention.**

   - As student nurses will become future qualified healthcare staff, it is imperative that during their 4 years of training they receive education and develop skills pertaining to the prevention and management of pressure. However, there is insufficient time allocated to wound care in university programmes and a lack of education on pressure ulcer prevention.

   - The authors undertook a quantitative, cross-sectional survey (a total of 60 fourth-year undergraduates were given questionnaires) to determine the extent of undergraduate nurses’ knowledge of, and attitudes towards, the prevention of pressure ulcers.

   - It was found that the participants, while displaying a positive attitude towards pressure ulcer prevention, had a poor knowledge of pressure ulcer prevention.

   - Ninety-seven percent of participants felt confident in their ability to prevent a pressure ulcer and had a moderate to high level of competency.

   - The authors discovered that having a high level of competency corresponded with having a positive attitude towards pressure ulcer prevention, but did not equate to possessing knowledge of pressure ulcer prevention.

   - In fact, attitude and knowledge had an inverse relationship. The participant who obtained the highest attitude score of 47 had one of the lowest knowledge scores of 10. Conversely, the participant who had the lowest attitude score of 31 obtained one of the higher knowledge scores of 18.

   - The findings taken from this study can be used as a baseline to inform future education and training programmes in clinical and university settings. The authors suggest that this will lead to improved patient outcomes.


2. **Avoidable antibiotic exposure for uncomplicated skin and soft tissue infections in the ambulatory care setting.**

   - Soft tissue and uncomplicated skin infections are among the most frequent indications for outpatient antibiotics. The authors undertook a retrospective cohort study to assess current prescribing practices and frequency of avoidable antibiotic exposure.

   - A total of 364 cases were analysed, comprising children and adults treated in the ambulatory care setting for uncomplicated cellulitis, wound infection or cutaneous abscess between 1 March 2010 and 28 February 2011.

   - The authors found that of 292 total cases where complete prescribing data were available, 46% of these cases encountered avoidable antibiotic exposure. Furthermore, it was discovered that use of short-course, single-antibiotic treatment strategies would have decreased prescribed antibiotic days by 19% to 55%.

   - It was concluded that approximately half of uncomplicated skin infections are associated with avoidable antibiotic exposure. Through the promotion of single-antibiotic treatment approaches, total antibiotic use could be substantially decreased.


3. **Negative pressure wound therapy for treating foot wounds in people with diabetes mellitus (Cochrane Review).**

   - Negative pressure wound therapy (NPWT) can be used to treat wounds in people with diabetic foot ulcers (DFUs). This Cochrane systematic review aimed to provide clear clinical guidance to facilitate decision making regarding its use.
To assess the effects of NPWT, compared with standard care or other adjuvant therapies, the review authors looked at published or unpublished randomised controlled trials (RCTs) that evaluated the effects of any brand of NPWT in the treatment of DFUs, irrespective of publication status or language of publication.

The authors reviewed five studies with a total of 605 participants. Two studies (502 participants in total) compared NPWT with standard moist wound healing. The three remaining studies were small with limited data.

The authors found that there is some evidence to suggest that NPWT is more effective in healing DFUs (in terms of reducing time-to-healing and reducing risk of amputations) compared with standard moist wound healing. This relates to postoperative amputation wounds, as well as chronic, debrided DFUs.

However, it was noted that these studies could be at risk of bias. The limitations in current RCT evidence would point to a need for further trials to be conducted. The authors conclude that any potential change in practice regarding the use of NPWT must be informed by clinical experience and acknowledge the uncertainty around this decision owing to data quality.


4   Feelings of powerlessness in patients with venous leg ulcers

People with venous leg ulcers (VLUs) can experience a variety of feelings, such as fear, feelings of loss, grief and powerlessness, which may adversely affect quality of life. Powerlessness can be described as a feeling where the patient believes that nothing will change the course of events, no matter what is done.

The authors undertook an exploratory, descriptive, analytic, cross-sectional study in Brazil, between May 2010 and April 2012, to assess feelings of powerlessness in 60 individuals with VLUs. Most patients were women and aged ≥61 years. Fifty-three percent of patients (n=32) had had a VLU for more than 10 years. The majority were smokers (77%) and non-smokers (87%).

All participants responded to the Powerlessness Assessment Tool (PAT) for adult patients. The PAT consists of a 12-item measure of powerlessness rated on a 5-point Likert-type scale (1 = never, 2 = rarely, 3 = sometimes, 4 = often, 5 = always).

Most participants reported a high PAT score indicative of strong or very strong feelings of powerlessness or loss of control. More than half (52%) of patients in this study reported total PAT scores ranging from 51–60, while 32% had scores from 41–50.

There were no significant differences in terms of feelings of powerlessness between sexes, smokers and non-smokers, alcoholics and non-alcoholics, and different age groups. However, the authors found that the presence of wound exudate and malodour had a significant impact in the study population (P=0.004).

The authors conclude that assessment of feelings of powerlessness may help to plan intervention that can minimise the impact of living with a VLU.


5   Current practice in the management of wound odour: an international survey

Malodour has been regularly cited by patients and carers as one of the most distressing and socially isolating aspects of their wounds, which is detrimental to their quality of life.

There is no standardised approach to assessment and management of wound odour. To collect baseline data between May 2010 and April 2012 the authors emailed an online questionnaire in English, Spanish, Italian and German to wound care organisations worldwide, palliative and oncology nursing organisations, and wound management specialists.

A total of 1444 individuals from 36 countries responded. Sixty-five per cent (n = 926) saw patients with wounds on a daily basis and 68% (n = 635) said that they spent up to 25% of their working week dedicated to wound management. Odour, pain and wound exudate were the greatest challenges.

Charcoal and silver-based dressings were the two most prominent dressings used for odour management; however, only 48.4% and 23% respectively reported these to be effective. Although the most effective treatment was cited as antimicrobial agents, but were not the most frequently used.

Eighty-nine percent agreed that there was a need to develop guidelines in this area as there is a ‘trial and error’ approach to odour management. There is low satisfaction with current approaches and further research and education is needed on how to assess and manage odour.


Wound digest