

# Canadian Association of Wound Care News

## First of Its Kind

**The Canadian Association of Wound Care** is very excited about the launch of *Wound Care Canada*. This project has been in development for more than two years, and it is our hope that this new publication will provide a strong communications mechanism for wound-care providers across Canada. It is also a way for wound-care providers to publish their experiences and research and address clinical issues in a national wound-care publication. By sharing expertise, we will all contribute to the ultimate outcome – better patient care for Canadians.



## Education

**S1, S2 and S3 Seminar Series.** Launched in May 2002 in Toronto, Ontario, to a sold-out audience, the S1 and S2 seminar series, Best Practice Recommendations for Wound Management, Putting Knowledge into Practice, has been designed to integrate CAWC best practice initiatives into daily practice. The S1 and S2 include both a theoretical and 'hands-on' component, while the S3 involves participating in a clinical setting in a wound management 'mentorship' program. Pre-reading assignments are posted on the CAWC Web site in advance of each program. The second S1 and S2 were held in Vancouver in June 2003 and others are planned for Montreal, Halifax, Toronto, Winnipeg and Yellowknife in spring 2004. For those individuals who have already taken S1 and S2, the CAWC Web site has further information on the S3.

## Research

**A New CAWC-Funded Study: Chronic Wounds in Canada.** The CAWC is funding a study to explore the extent of the problem of chronic wounds in Canada. The complete results of this study will be available in 2004 once the study has been published; an overview of the study was presented at the 2003 conference in Toronto. Please see the abstract written by Dr. P. Houghton and Dr. G. Woodbury in this issue of *Wound Care Canada*.

## Clinical Practice

The Directors of the CAWC have written and published articles covering the recommendations for best practices in the areas of diabetic foot ulcers, pressure ulcers, venous leg ulcers, preparing the wound bed and the principles of wound healing. With the kind permission of *Ostomy/Wound Management* ([www.o-wm.com](http://www.o-wm.com)), these articles

are reproduced on our Web site at [www.cawc.net](http://www.cawc.net) (as PDF documents) in their entirety. They are currently being translated into French to provide francophones with access to these important educational materials. The French translations will be complete and posted on the CAWC Web site by the end of December 2003.

## The CAWC Annual Conference

**The Ninth Annual Conference of the CAWC** held in Toronto, November 6-9, 2003, was organized by the CAWC's Chairman Emeritus Dr. Gary Sibbald and conference Co-Chair Connie Harris. They worked with the rest of the organizing committee to develop an innovative and exciting agenda and faculty.

The 10th anniversary of the CAWC conference will be held in Calgary, November 2004 and will be chaired by outgoing CAWC president Heather Orsted. Further information will be posted on the CAWC Web site at [www.cawc.net](http://www.cawc.net)

## CAWC Membership

There has never been a better time to become a CAWC member and to experience the benefits that being a CAWC member offers. Your decision to join the CAWC should be fueled by the belief that together, as an organized community-based association, we can improve wound care for patients, clinicians, caregivers and related organizations. We need your ongoing support to build your association and realize our objectives.

## Membership Benefits

Networking/Communication/Access to Education

Opportunity to apply for CAWC scholarships

CAWC interactive Web site – full access

CAWC monthly e-bulletin

CAWC networking directory – published electronically

Access to the CAWC interactive bulletin board

E-mail notification of important events/news in wound care

Right to sit on CAWC committees and the CAWC Board of Directors.

## Economic

Free subscription to *Wound Care Canada* – the newest publication in Canadian wound management

15% discount on registration to all CAWC events and educational programs, including the annual conference (on regular rates only)

Reduced rates on CAWC educational materials and boutique items

Free subscriptions to BCS Group publications (*Canadian Family Physicians' Home Care Solutions*; *Rehab & Community Care Medicine*; *Canada's Family Guide to Home Health Care & Wellness Solutions*; *Today's Kids*)

33% discount on the subscription rate for *The Chronicle of Skin and Allergy*

25% discount on subscription rates for *Ostomy/Wound Management* and *Wounds*.

We encourage you to become a member in order to be a part of Canadian wound management innovation. Become a member today. Join online at [www.cawc.net](http://www.cawc.net).



## CAWC Board Nominations

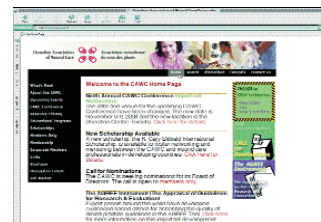
Nominations for the new CAWC Board of Directors have been made throughout the fall and were announced at the 2003 CAWC Conference in Toronto, November 6-9.

The CAWC looks forward to your participation and encourages you to contact us at [cawc@sympatico.ca](mailto:cawc@sympatico.ca) and begin making a difference in Canadian wound care.

The complete roster of CAWC directors is available online.

## International Partnerships

The CAWC will be participating in the World Union of Wound Healing Societies meeting in Paris, July 8-13, 2004. Further information will be posted on the CAWC Web site at [www.cawc.net](http://www.cawc.net). We have also launched our first international scholarship; the R. Gary Sibbald International Scholarship is designed to foster networking and mentoring between the CAWC and wound-care professionals in developing countries. Complete information is available on the CAWC Web site.



## CAWC Scholarships

The Canadian Association of Wound Care is dedicated to the advancement of wound care in Canada by co-ordinating a collaborative, interdisciplinary effort among individuals and organizations involved with wound caring. **The CAWC wishes to encourage these individuals by offering a group of six scholarships valued at \$2,500 each, which will serve to help educate, inform and promote best practice within the wound-care community and improve patient care.** There is also a new international scholarship to be awarded for the first time at the 2003 CAWC conference (see above). These scholarships are awarded in the form of educational and research grants and are usually presented to the recipients at the annual conference. There is also a New Investigators Award for outstanding achievement in clinical and laboratory research by a new investigator. For further information on how to apply for a CAWC Scholarship or Award, please check out our Web site at [www.cawc.net](http://www.cawc.net)

## Public Policy

There is a need for an evidence-based approach to wound management. The CAWC will be using a new tool to rate the evidence base and process of guidelines, protocols and best practices. Please see the article on the AGREE Instrument written by the CAWC's Public Policy committee in this issue of *Wound Care Canada*.

## The Extent of Chronic Wounds in Canada

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needed research in this area. From our analysis of the existing Canadian and international information on this subject we intend to provide a template of recommendations and propose a standardized format to help guide future prevalence and incidence studies on chronic wounds performed in Canada. In this way prevalence and incidence data about chronic wounds might be more easily collected, collated and combined from across Canada to provide national statistics.

If the magnitude of the problem of chronic wounds in Canada and the cost of care can be confirmed, it would help to build the rationale for additional funding to support educational and research initiatives in wound

care; to identify gaps for specifically targeted future research projects; to provide benchmarking levels from which the efficacy and effectiveness of implementation of 'best practices' guidelines or interventions can be compared; and to provide the rationale for advocating for future funding to assist individuals with chronic wounds.

We look forward to sharing our findings with attendees, through an oral presentation, at the ninth annual conference of the CAWC in Toronto in November 2003. It is anticipated that the CAWC and others will use the information derived from this project to advocate for the needs of patients with chronic wounds, their caregivers and researchers. ☺

## Dr. Gary Sibbald Addresses the Challenges of Compression

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night) or gabapentin (neurontin). Optimal pain relief is often obtained by combining nociceptive and neuropathic treatment agents.

For compression, it is important to start with minimalist bandaging such as a continuous cotton roll (cling) or Tubigrip® with a single layer, and then multiple graduated layers may be added for edema and pain control. Inelastic systems can be replaced with elastic bandages as the pain and edema come under control. ☺

### References

• Kunimoto B, Cooling M, Gulliver W, Houghton P, Orsted H, Sibbald RG. Best practices for the prevention and treatment of venous leg ulcers. *Ostomy/Wound Management*. 2001;

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- Reddy M, Kohr R, Queen D, Keast D, Sibbald RG. Practical treatment of wound pain and trauma: a patient-centered approach. An overview. *Ostomy/Wound Management*. 2003; 49(4 Suppl):2-15.
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## Le soin des plaies

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tion de l'Ordre des infirmières et infirmiers du Québec a donné suite à cette recommandation.

Le document est actuellement disponible à l'adresse de l'ordre provincial soit au 4200, boulevard Dorchester Ouest, Montréal

(Québec) H3Z 1V4. Il est intéressant de préciser que les deux premiers articles ont fait l'objet du concours Magazine de la revue L'Infirmière du Québec et qu'ils ont reçu le premier prix à titre d'article préféré publié au cours de l'année 2001. ☺

## Protection de la peau...

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moitié, avec l'un des produits traditionnels, des bandes Steristrips<sup>MD</sup> (3M Healthcare) servant à diviser la région en deux.

Les résultats indiquent que toutes les préparations sont similaires au point de vue efficacité clinique. Le nouveau protecteur liquide en acrylate (Cavilon<sup>MD</sup> No Sting, 3M) s'est avéré statistiquement plus avantageux pour l'efficacité et le rendement : il était plus convivial pour le personnel soignant et le patient, permettant la visualisation des bords de la plaie et étant plus rapide à appliquer en milieu clinique. ☺



## 10<sup>th</sup> Annual CAWC Conference

Join us for a Conference and Birthday Cake

In Calgary, Alberta

November 18 - 24, 2004

