

The World Union of Wound Healing Societies (WUWHS)

Meeting in Paris



BY Gary Sibbald

The World Union of Wound Healing Societies represents a collaborative initiative that now involves the participation of 40 wound-care societies around the world. The inaugural meeting was an Australian effort in September 2000 that linked 12 or more societies and the Australian Wound Healing Society in Melbourne. The co-operative effort is alive and flourishing as we move toward the Paris meeting July 8 to 13, 2004. This is the second in a schedule of meetings planned to be held every four years.

This meeting will bring together the hosting societies, including the French Wound Healing Association, European Union of Wound Management, European Tissue Repair Association and the European Pressure Ulcer Advisory Panel, with a number of co-operating societies, including the Canadian Association of Wound Care.

The venue is the Palace de Congress in Paris, and the sessions will have simultaneous French and English translations. Each day, from Thursday through Tuesday, will feature a number of workshops, symposia and

plenary sessions along with satellite symposia. There are over 10 faculty members confirmed from Canada, and several of our members have submitted posters. Participants will have a chance to network with more than 3,000 colleagues with similar challenges from developed, developing and underdeveloped countries.

There are several ways to take in the meeting. Affordable packages and travel information is available on the CAWC Web site (www.cawc.net). Hotels range from cheap and cheerful to four- or five-star facilities. Paris offers the best *joie de vivre* with wine, food and entertainment, along with culture and ambience. What a wonderful launch to a European adventure and continued learning in wound care. We hope to see you there. ☺

**R. Gary Sibbald,
BSc, MD, FRCPC
(Med, Derm),
MACP, DABD,**

is Chair, International Committee, CAWC; and Chair, Education Committee, WUWHS (WUWHS.org)

Negative Pressure ... continued from page 44

than average proportion of positive outcomes, and the other three had a lower than average proportion of positive outcomes. The authors believe that duration of the wound is only one of many factors that can affect healing.

Conclusions

This study provides initial data regarding the utility of negative pressure therapy in a variety of

wounds in a community setting. Studies such as these are important because they help better define how various approaches should be applied and in what patient populations.⁶ As a result of the study, valuable information was gained. The information will be useful in defining appropriate use of negative pressure therapy and developing program-specific guidelines for the use of it. ☺

References

1. Sibbald RG, Mahoney J. VAC® Therapy Canadian Consensus Group. A consensus reports on the use of vacuum-assisted closure in chronic, difficult to heal wounds. *Ostomy/Wound Management*. 2003;49(11):54.
2. Greer SE, Duthie E, Cartolano B, et al. Techniques for applying sub atmospheric pressure dressings to wounds in difficult regions of anatomy. *Journal of Wound, Ostomy and Continence Nurses Society*. 1999;26(5):250-3.
3. Wound Care Guidelines. Descriptions of adjunctive wound therapy/diagnostic tools. Capital Health Authority. Edmonton, Alberta. 2001;A.4.4-A.4.5.
4. Broussard CL, Mendez-Eastman S, Franz R. Adjuvant wound therapies. In Bryant, R. (ed), *Acute and Chronic Wounds*. St. Louis: Mosby 2000:440.
5. Schieszer J. VAC benefits vary depending on wound type. *The Medical Post*. June 3, 2003:42-43.
6. Armstrong DG, Lavery LA, Abu-Rumman P, Espensen EH, et al. Outcomes of subatmospheric pressure dressing therapy on wounds of the diabetic foot. *Ostomy/Wound Management*. 2002;48(4):64-68.
7. Pieper B. Mechanical forces: Pressure, shear, and friction. In Bryant R (ed.). *Acute and Chronic Wounds*. St. Louis: Mosby. 2000:222.