# Prevention Is the First Step

Sue Rosenthal

According to the Canadian Diabetes Association, almost three million Canadians currently have diabetes. This number is expected to soar over the next two decades due to an aging population, increased obesity rates and the large number of immigrants to Canada who come from regions where the populations are at higher risk of type 2 diabetes. For the wound-care community, the implications of this issue have already been felt and will continue to be an area of great concern. According to the National Institutes of Health, 15 per cent of persons with diabetes will end up with a diabetic foot ulcer. While preventing type 2 diabetes is the most important health strategy, wound-care clinicians can be effective at the frontlines in helping people already diagnosed with diabetes. In this issue of *Wound Care Canada*, we look at a number of ways that wound-care clinicians can prevent diabetic foot ulcers—everything from basic foot care to patient education and offloading. We even have a story on how Canadians are helping wound-carers in Mexico, where a foot ulcer means almost certain amputation.

This issue is not all about diabetes, however. You'll find the next article in the popular CAWC series of best practice recommendations, on skin tears. We round things out with shorter articles that have become reader favourites: Rob Miller's "Wound Sleuth," literature reviews, and wound-care news from across Canada and around the world. You'll also see listings for the many important wound-care events being held across the country this year.

*Sue Rosenthal,*
*Editor*

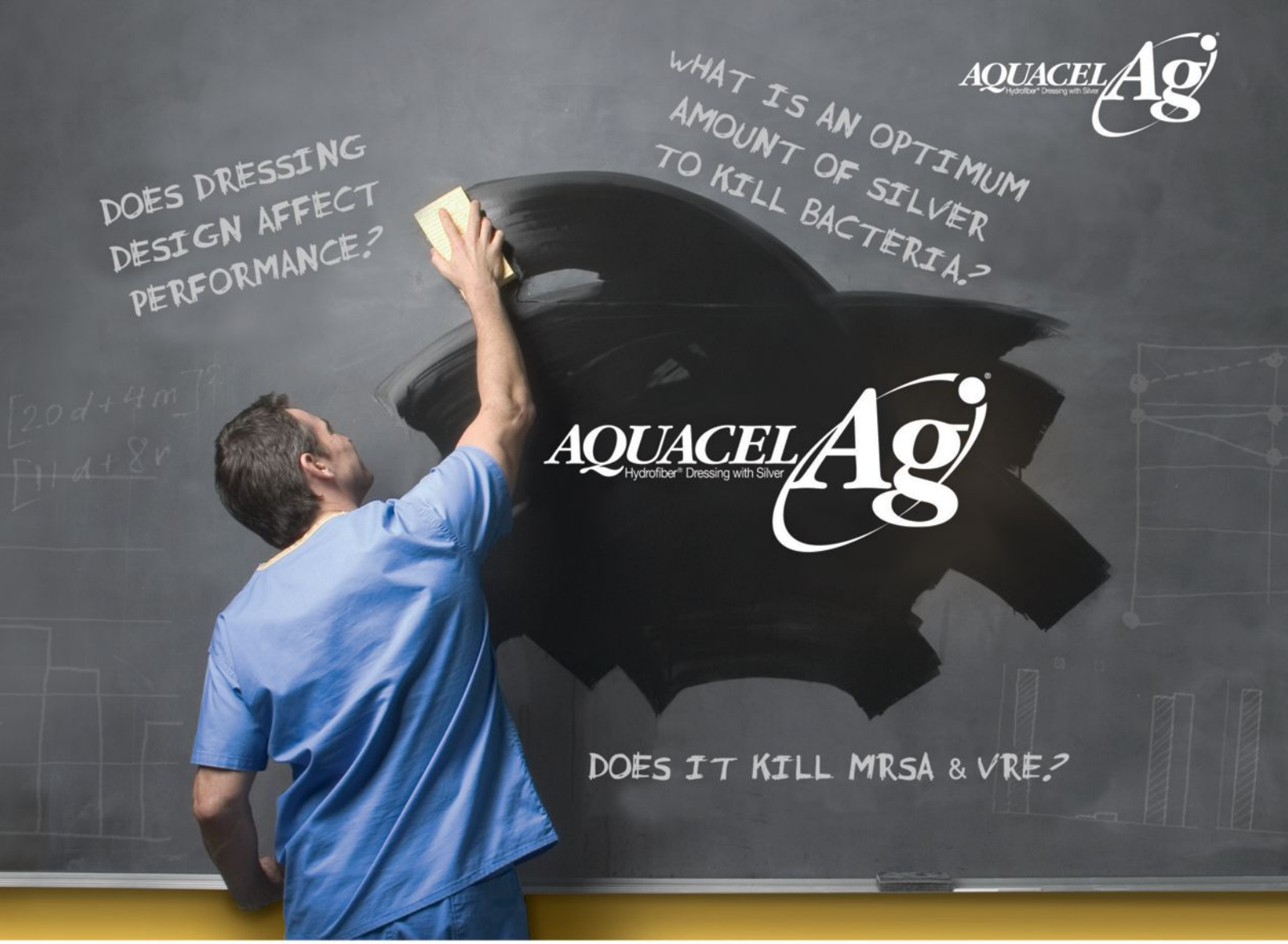
**Sue Rosenthal, BA, MA,** specializes in health and wellness communications and has been associated with the CAWC since 2000.

# Première étape : la prévention

Selon l'Association canadienne du diabète, près de trois millions de Canadiens sont actuellement atteint du diabète. Au cours des deux prochaines décennies, ce nombre devrait monter en flèche, en raison du vieillissement de la population, de la hausse du taux d'obésité et du nombre croissant d'immigrants au Canada provenant de régions où la population est à un niveau de risque plus élevé d'être atteinte du diabète de type 2. Pour la communauté en soins de plaies, cela représente un défi de taille qui se fait déjà sentir et qui continuera d'être d'une grande importance. Le National Institutes of Health indique que 15 % des personnes diabétiques auront un ulcère plantaire en raison du diabète. Bien que la prévention du diabète de type 2 soit la meilleure stratégie, les cliniciens en soins de plaies peuvent participer activement en aidant les personnes ayant été diagnostiquées avec le diabète. Dans ce numéro de *Wound Care Canada*, nous examinons différentes approches disponibles pour les cliniciens dans la prévention des ulcères plantaires dues au diabète, commençant par les soins de base des pieds en passant par l'éducation du patient et la réduction de pression. Nous avons également une histoire sur des Canadiens qui apportent leur aide en soin de plaies au Mexique, où un ulcère plantaire signifie souvent une amputation.

Ce numéro ne traite pas seulement du diabète. Il contient également un nouvel article de la populaire série de l'ACSP sur les recommandations des pratiques exemplaires. Ce mois-ci, les lésions cutanées sont à l'honneur. Vous pourrez terminer votre lecture par un des courts articles qui sont devenus vos préférés : « Wound Sleuth » de Rob Miller, les revues littéraires et les nouvelles sur le soin de plaies au Canada et à travers le monde. Vous y trouverez également la liste de nombreux événements importants sur le soins des plaies qui auront lieu à travers le pays cette année.

*La rédactrice,*
*Sue Rosenthal*

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**References: 1.** Walker M, Hobot JA, Newman GR, Bowler PG. Scanning electron microscopic examination of bacterial immobilisation in a carboxymethyl cellulose (AQUACEL®) and alginate dressings. *Biomaterials.* 2003;24:883-890. **2.** Bowler PG, Jones SA, Davies BJ, Coyle E. Infection control properties of some wound dressings. *J Wound Care.* 1999;8(10):499-502. **3.** Walker M, Cochrane CA. Protease sequestration studies: a comparison between AQUACEL and Promogran in their ability to sequester proteolytic enzymes. WHRI2494 WA139. May 27, 2003. Data on file, ConvaTec. **4.** Jones SA, Bowler PG, Walker M, Parsons D. Controlling wound bioburden with a novel silver-containing Hydrofiber® dressing. *Wound Rep Reg.* 2004;12:288-294.



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Canadian Association of Wound Care / Association canadienne du soin des plaies

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The Canadian Association of Wound Care is a non-profit organization of health-care professionals, industry participants, patients and caregivers dedicated to the advancement of wound care in Canada.

The CAWC was formed in 1995, and its official meeting is the CAWC annual conference held in Canada each year. The association's efforts are focused on five key areas: public policy, clinical practice, education, research and connecting with the international wound-care community. The CAWC works to significantly improve patient care, clinical outcomes and the professional satisfaction of wound-care clinicians.

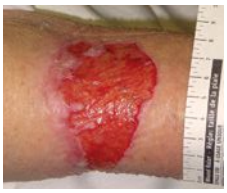
L'Association canadienne du soin des plaies est un organisme sans but lucratif regroupant des professionnels de la santé, des gens de l'industrie, des patients et des membres du personnel soignant fortement intéressés à l'avancement des connaissances pour le soin des plaies au Canada.

Fondée en 1995, l'ACSP organise, chaque année, au Canada, un congrès qui lui tient lieu de réunion officielle, le Congrès annuel de l'ACSP. L'association consacre ses efforts dans cinq domaines particuliers : les politiques gouvernementales, la pratique clinique, la formation, la recherche et la création de liens avec la communauté internationale directement impliquée dans le soin des plaies. L'Association canadienne du soin des plaies vise une amélioration significative du soin donné au patient, des résultats cliniques et de la satisfaction professionnelle des spécialistes en soin des plaies.

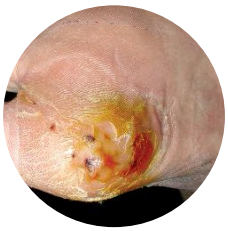
# Features

## CLINICAL PRACTICE













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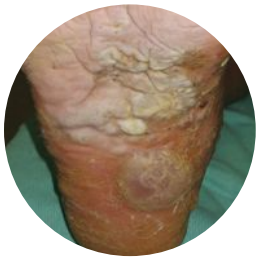





**The CAWC Gets a New Home**

Earlier this year, the CAWC moved into new offices to accommodate our recent expansion of activities. As a result, the CAWC has a new mailing address and new phone numbers. Please update your contact list so you can stay in touch!

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