CAWC Events

Special Theme Meetings "Are You Ready for Change?"

Victoria, British Columbia: October 24-26, 2008 Halifax, Nova Scotia: November 7-9, 2008 (see www.cawc.net and page 56 for details)

CAWC S-Series

In spring 2009 the CAWC's renowned S-Series will be held in Vancouver: February 13-14, Toronto: March 6-7 and Montreal: April 17-18 (in French)

Visit the CAWC Web site at www.cawc.net for details!

CAWC Annual Conference

Quebec City, Quebec: October 29 to November 1, 2009 www.cawc.net

Other Events

Atlantic Foot Care Conference: "The Feet We Greet"

Holiday Inn Select Halifax, Nova Scotia Registration:

September 28-29, 2008

www.eSourceEvent.com/FCN

Symposium on Advanced Wound Care and Wound **Healing Society Meeting**

April 26-29, 2009 Grapevine, Texas www.sawc.net

28th Annual CAET Conference: "Learn in the Land of Living Skies"

May 27-30, 2009 Delta Regina Regina, Saskatchewan www.caet.ca

Wound, Ostomy and **Continence Nurses Society** Conference

June 6-10, 2009 St. Louis, Missouri www.wocn.org

Industry News

New Best Practice Document on Pain from WUWHS and Mölnlycke Health Care

The World Union of Wound Healing Societies (WUWHS) together with Mölnlycke Health Care have released a second Best Practice Guideline: Minimising Pain at Dressing Related Procedures. It contains expert knowledge from worldrenowned wound-care specialists and provides an update on the latest scientific findings, as well as 10 easy-to-overview pain-relieving strategies, including not using dressings with aggressive adhesives that can cause pain to the patient and trauma to the wound or peri-wound skin. According to the document, dressings with soft silicone adhesive technology, such as Safetac technology, have proven in several studies to be less painful during dressing changes compared with

other advanced dressings with traditional adhesives. The document can be found at: www.molnlycke.com/item.asp?id =47121&lang=2&si=3.

Integrated Solutions from ArjoHuntleigh

ArjoHuntleigh can offer integrated solutions for the care of patients/ residents with reduced mobility and related conditions in virtually all types of care environments. We now offer solutions covering these interrelated areas of care:

- Therapeutic Support Surfaces
- Patient Handling
- · Bariatric Care
- Acute Medical Beds
- Facility Planning
- Flusher Disinfectors
- Hygiene and Bathing ArjoHuntleigh is now positioned to be an even stronger partner to you, in the pursuit of costeffective, high-quality healthcare ... with people in mind.

3M™ Tegaderm™ Matrix **Dressing: Supporting Faster Healing in Chronic Wounds**

Recent research into chronic wounds has revealed that the bioburden and protease enzyme imbalance, in particular differential expression of matrix metalloproteinases (MMPs) and their inhibitors (TIMPs), are strongly associated with delayed healing in these wound types.

Tegaderm™ Matrix is a wound dressing impregnated with polyhydrated ionogen (PHI) ointment, which contains four metal ions that are released into the wound in the presence

of exudates, acting directly on the fibroblast. This downregulates MMPs, balancing the chronic wound environment and accelerating healing.

For more information about the 3M™ Tegaderm™ Matrix Dressing, please contact 1 (800) 364-3577.

DM Systems, Inc., Adds Two New Products to Its Growing Family of Heelift® Suspension Boots

DM Systems, manufacturer of the Heelift® Standard Suspension Boot has added two new products: Heelift® Bariatric and Heelift® Petite. The new Heelift® Bariatric Suspension Boot is sized specifically for bariatric patients. It is available in smooth foam only, and is designed for patients who weigh up to 600 pounds and who have a calf circumference of between 12 and 23 inches. Heelift® Petite helps meet pressure ulcer prevention needs for pediatric patients or patients who are shorter than average. It is available in either smooth or convoluted foam and offers customizable heel pressure redistribution for patients who range in height from 3 feet, 10 inches to 5 feet, 4 inches and who have calf circumferences of 6 to 10 inches.

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Bringing the World's Best to You



Sue Rosenthal

In the Guest Editorial, Cathy Burrows and David Keast did a great job of laying out the background of the Canadian involvement in the World Union of Wound Healing Societies (WUWHS) Congress held in Toronto in June 2008, and of thanking the many CAWC members who were involved in gathering information for this issue of Wound Care Canada. I. too, would like to thank everyone on the reporting teams (listed below, with team leaders' names first). They worked hard, worked well together, and—I hope enjoyed the experience (some liked it so much they attended sessions outside their designated streams and contributed materials to more than one article!).

Pre- and post-session meetings generated lively discussion among the teams and between members of different teams. As a professional communicator, I enjoyed listening to the debates—and learned a lot. I wasn't the only one. Many of the reporters indicated they, too, had enjoyed the exchanges with their colleagues at the debriefing meetings. A number of them said they'd also benefited from having a different point of view when attending the sessions. Seeing the presentations through the eyes of a critical reporter rather than as a clinician allowed them to process the material in new, and newly meaningful, ways.

The summary articles the teams produced vary somewhat in length and approach. In some cases the information will confirm what you already do. In others, you'll read about controversies, the latest information or areas that need further research. You'll get a glimpse of how wound care is practised in other areas of the world. But in

all cases, you'll find many kernels of valuable information regardless of your type of practice, level of expertise or specific area of interest. Remember, though, that these summaries report on what was presented at the WUWHS meeting only and represent a broad range of opinion, research and experience. We therefore strongly encourage you to consult other literature before implementing practice based on this brief information.

These articles reflect an unprecedented gathering of the latest information on wound prevention and care from around the world, and since no single individual could possibly have been at every session, this issue of *Wound Care Canada* is most certainly more than the "next best thing"!

Sue Rosenthal, Editor

Pressure Ulcers: Kimberly Stevenson, Linda Norton

Diabetic Foot Ulcers: Christine Pearson, Mariam Botros, Kyle Goettl

Ostomy/Continence/Skin Care: Connie Harris, Janet Kuhnke, Kimberly LeBlanc

Leg Ulcers: Cathy Burrows, Lise Goettl

Acute Wounds: Mario Coté, Edie Attrell, Maryse Beaumier

Complex Wounds: Marc Despatis, Nancy Parslow, Leah Shapera

Global Perspectives: Patricia Coutts, John Ivory, Judy Ryan, Wilma Sterling

Free Papers: David Haligowski, Anne LeMesurier

Canadian Perspectives: Martine Albert, Karen Bruton, Sunita Coelho

Research: Gail Woodbury, Afsaneh Alavi, Marjorie Fierheller, Pamela Houghton, David Keast

Standby/Roving Reporter: Rob Miller

Sue Rosenthal, BA, MA,

specializes in health and wellness communications and has been associated with the CAWC since 2000.



Une version française de cet article est disponible à la section Wound Care Canada du site Web de l'ACSP à www.cawc.net.

