Portugal has a population of 10,000,000 inhabitants and a decreasing birth rate. The main cause of mortality is cerebral vascular accidents followed by road accidents. As in most European countries, thanks to the scientific and technological advances, the number of people aged 60 and over is growing at a fast rate. This growth clearly has implications for future social and health care needs. In a recent study, it was shown that 73% of our population was not satisfied with their health assistance, which is mainly provided by the government. In addition, ambulatory care is very poorly reimbursed. Alongside the fact that the population is aging, other factors that increase the risk of chronic wounds such as obesity, poor mobility and low income are particularly prevalent in the elderly community, putting them at even higher risk of developing chronic wounds and increasing the future strain on resources.

Although in the last decade the subject of wound care has gained increased interest, there are many problems associated with the prevention and treatment of wounds, particularly chronic wounds, still to be overcome. Firstly, there is a large gap between the resources available in the community compared with those in the acute services. This leads to many patients with chronic wounds being referred to hospitals, rather than being cared for in the community. Also, the approach is still focused on care by physicians who have total responsibility for this patient group. The nurse specialty of tissue viability and wound management does not currently exist in Portugal. At the same time, there is no community access to specialized assessment methods while protocols to assess, manage and document ulcer care are rare. Patient compliance and motivation are not considered an important part of the holistic approach to patient care. There is a serious lack of knowledge about technological developments in wound dressings with dressing selection taking place on an ad hoc basis. In the community health centres, the nurses have more autonomy but lack resources.

In Portugal, the lack of an holistic approach to wound care can be considered a significant problem with implications to the cost and quality of care. Based on the principle that to implement a concerted action plan it is essential to develop skills in this area, a group of health professionals from different backgrounds (doctors, nurses, pharmacists, etc.) created the Wound Care Research Group G@IF – Grupo Associativo de Investigação em Feridas, in March 2002. At present we have 200 individual members and nine corporate members.

We have started to identify the main aspects that need to be addressed if any progress is to be made in this field. Firstly, there is a need to (a) develop a culture of evaluating recent scientific knowledge and to (b) promote evidence based practice. Secondly, a system needs to be developed to deliver appropriate resources with relevant training in their appropriate use. Finally, a system of documentation needs to be established to allow for objective evaluation of the results. We believe that this may only be achieved by a concerted action involving both hospitals and community health centres.

One of the main problems identified is that practitioners continue to have difficulty in compiling empirical and contextual evidence and integrating evidence-based changes into practice. To help define specific problems, potential interventions and desired outcomes, G@IF has developed several activities in different intervention areas.

G@IF has created an Internet page – www.gaif.net – with articles; discussion sessions; links to other wound care societies and national and international news, among other things. With this we hope to help practitioners by establishing a system of reference for their practices.

Since principal barriers for further education are lack of time, economic resources, staff cover and a lack of relevant training courses, G@IF has been trying to develop a range of activities to address this situation. To date the following educational events have taken place:
- First Symposium on Prevention of Pressure ulcers, on March 2002, in Lisbon.
- First summer school, from the 1st to the 4th of October 2002, in the charming village of Pedrogão Pequeno. This featured lectures from international experts such as Courtney Lyder from the USA, Hugo Partsh from Austria and Mark Collier from the UK.
- First Symposium on Prevention of Chronic Wounds, on the 21st of March 2003, in the city of Figueira da Foz, with Joan Torra e Bou from Spain as international guest speaker.
- Second summer school, from 3 to 6th of June 2003, in the previously cited venue.
- First Symposium on Infection of Chronic Wounds, on the 17th of November 2003, in Lisbon, with Keith Harding, a recognised expert on this field as guest speaker. Due to its success this event was repeated in Porto in April 23rd in the presence of more than 250 delegates.
We believe that these kinds of activities promote an easy and accessible way of obtaining up-to-date information. Most of the speakers are Portuguese, which is a way of recognising and motivating national practitioners. In the coffee area, delegates have the opportunity to peruse products and talk to company representatives. G@if considers companies involved in tissue viability as part of the multi-professional team, albeit slightly peripheral. Our corporate members have contributed to elevating our level of knowledge through their expertise and support.

G@if is also promoting some activities in the research field:

- Validation of the Push Tool, Bates scale, Baby Braden scale and Cardiff scale.
- Project of implementation of the Braden scale in ten hospitals across Portugal (financed with European funds). Pressure ulcers are a common problem in hospitals, and this study, over a three-year period, aims to examine the problem in more depth and try to give quality care in a resource-limited environment. This will be achieved, through the implementation of the Braden scale (validated in Portugal), development and implementation of guidelines and education. Every three months an audit will take place covering clinical practice, such as documentation of prevalence data, risk assessment and provision of specialist equipment. This aims to find out if the implementation and dissemination strategy for the guidelines has led to better care.

All these studies have taken place in collaboration with the Center of Studies and Research in Health (CEIS) and the Institute of Quality in Health (IQS).

Furthermore, G@if is aiming to publish a range of small textbooks covering different aspects of wound care management, as Portugal is lacking in national publications on wound management. By the end of 2004, the first textbook will be published.

At a European level G@if has attended several European events such as those promoted by EPUAP and EWMA. We appreciate EWMA’s support and look forward to developing projects together in order to help raise the profile of acute and chronic wounds.

We are conscious that changing professional behaviour is not easy, as an individual’s professional practice is influenced by numerous factors. Success needs time, but with the help of all, we will spend the necessary time in the development and implementation of strategies to understand the complex multifactorial issues that may impact on the care and progress of patients and develop day-to-day practice in wound care treatment.

What Is New in Wound Treatment in Czech Republic?

To keep it short and factual, let’s just mention that on one spring working day in Brno in April 2004 110 doctors and nurses attended our meeting. This shows how committed we are to wound care.

In the Czech Republic (and in other countries as well, as we found out), it is vital we raise awareness of chronic wound treatment within the healthcare professions and especially among GPs. To achieve this our effort goes two ways: education and insurance companies’ cooperation.

Education takes place in GP’s seminars organized by the Czech medical chamber. At these seminars we lecture on current wound treatment issues and best practice in wound care. In addition, we also lecture to students at the National Center for Non-Medical Majors in the Health Industry in Brno.

As for insurance company co-operation (and the largest and most important is general health insurance company Všeobecná zdravotní pojišťovna), we actively participate in negotiations to standardize wound treatment classifications in the insurance registry that influence financial reimbursement for patients.

In November in Pardubice, we hosted an autumn symposium with international participation. It was a representative event that, due to its success, may become a regular event in the future. At the symposium, our guest speaker was Salla Seppänen who lectured on her experiences and views on wound treatment. Hearing and comparing experiences on an international level contributes much to our society as it helps us avoid some mistakes and learn new methods, technologies and experiences.

International conferences are interesting and useful for us, and we look forward to attending more congresses in the future.

And what are we trying to achieve in the future? We need to continue educating our members, and also doctors, nurses and other professionals in the health care industry in the best in wound care treatments. We also have an important role to play in document control of medical care and the standardization of treatments in our hospitals and clinics and in insurance companies negotiations. This role will be even more crucial now the Czech Republic has joined the EU. The future is looking bright and busy for our society.