EWMA Presentation at the Hungarian Wound Care Society Meeting

I was delighted to be given the opportunity to present a paper on the European Wound Management Association at the 8th Meeting of the Hungarian Wound Care Society on October 27th in the Grand Hotel Hungaria in Budapest.

There were approximately 200 delegates, two thirds of whom were nurses. The meeting opened with a presentation by Professor Judit Daróczy (who has just been elected as a co-opted member to EWMA) on the pros and cons of evidence based medicine and the use of guidelines in wound management. This was followed by a presentation by Dr. Mária Hok (an active member of the European Pressure Ulcer Advisory Panel) on the use of evidence based medicine and research by nurses. I was also treated to a delightful presentation by the president of the Hungarian Wound Care Society, Dr. Sugár on the artistic representation of treatment of wounds (mainly miraculous) in the Middle Ages and Renaissance throughout Europe, and a presentation by Dr. Ébert from Augsburg on the efficacy of homeopathy in the management of intractable skin conditions.

Delegates were able to view products from different companies during breaks at the industry exhibition and presentations were made during the conference by various companies introducing their products.

I gave a presentation on behalf of EWMA outlining the structure, history, aims, objectives and achievements of EWMA and invited abstracts for oral or poster presentation at the next EWMA conference in Prague. We very much hope that there will be a strong Hungarian presence in Prague in May 2006, and that we shall be able to continue working closely together.

I would like to take this opportunity of thanking the Hungarian Wound Care Society and particularly Dr. Sugár and Péter Hanga for their warm welcome and hospitality in their beautiful city to which I felt very privileged to have been invited.

Deborah Hofman
Member of EWMA Council

ULTRASOUND FOR CHRONIC WOUND HEALING

Do you use therapeutic ultrasound to treat chronic wounds, such as leg ulcers and pressure sores?

This form of treatment was common in the past in the UK, but does not appear to be well used at present, possibly because of its weak evidence base. We would like to investigate whether usage is more common elsewhere in Europe.

If you use this treatment method, or know other clinicians who do so, we would be grateful to hear from you. We are interested in hearing what conditions you treat, treatment protocols and outcomes. Many thanks.

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