Activity of the Hungarian Lymphoedema and Wound Managing Society

Background: In Hungary chronic wound assessment and treatment is carried out by general practitioners, dermatologists and surgeons. There are no standards of care and there is no consensus within the levels of professional care providers – general practice, hospital, rehabilitation, etc. – concerning their participation in that care. The only professional center for the treatment of chronic peripheral lymphoedema in Hungary is in the department of Dermatology and Lymphology of the Saint Stephan Hospital, Budapest. In Hungary dermatologists provide treatment for chronic lymphoedema. The medical staff of Saint Stephan Hospital has established the accepted and published guideline for complex oedema relief. As skin lesions of lymphoedema patients (especially those with complications) need dermatological care, it seems to be a good idea to link the care of lymphoedema, wounds and dermatological diseases.

Goals:
- to acquaint GPs and specialists with the established standards of care;
- to stress the importance of the levels of care (each patient should receive the appropriate treatment according to his status) otherwise the care can be too expensive;
- to educate wound care nurses and establish provision of a recognized training programme with diploma;
- to establish provision of information and support for patients and their relatives;
- to establish a specialized nursing unit for chronic wound treatment.

In 2007 basic changes will happen because of the reform of the national healthcare system in Hungary. Parallel to the diminution of the number of active hospital beds the number of rehabilitation and chronic beds will increase. With this in mind, the Hungarian Wound Managing Society (MSKT) submitted an application for a specialized nursing unit for chronic wound treatment with 40 beds that could be set up in Saint Stephan Hospital.

Methods and activities:
1. Every year the Hungarian Wound Managing Society (MSKT) organizes a congress on a current topic. In 2006 the topic was the guideline of chronic wound treatment. This guideline was handed in to the Ministry of Health. We also discussed the competency and training of wound care nurses.
2. Involvement of nursing directors: In Hungary there are no centers for wound treatment; care of chronic wounds is performed in dermatology and surgery outpatient clinics and departments. For this reason, wound care presents a problem for those hospital departments (internal medicine, diabetology, gastroenterological surgery) where patients with chronic wounds are usually treated. In 2006 we organized a national meeting for the nursing directors of hospitals and the decision was made that the training of nurses in wound treatment will be supplemented and supported with a license exam.
3. Institute of Nursing Postgraduate Diploma: Twice a year we organize a 54-hour long training programme for nurses in chronic wound treatment incorporating both theory and practice. Until now this training did not give a license for the nurses to work independently (only a diploma).
4. Nurses working in chronic wound treatment would need a license to be able to independently treat patients referred to the communal centers by doctors. To address this, the first half of 2007 is to be spent defining the competencies of the nurses’ role. This is going to be done in cooperation with representatives of different specialties: surgery, infectology, hygiene, diabetology, traumatology, dermatology, internal medicine, angiology, and vascular surgery to ensure an ‘all disciplines’ approach to wound care.
5. Specialized nursing unit for chronic wound treatment: we have started to establish the operational conditions and the quality assurances required for the activity/operation of a specialized nursing unit. Within the healthcare reform programme, the opening of the unit is planned for the second half of 2007.

Summary and problems:
1. The guideline for chronic wound treatment appropriate for the Hungarian healthcare, hospital and insurance system has been accepted by a professional board and has been officially published.
2. The guideline has to be accepted by other medical specialties and the drain on the resources of the other levels of care has to be monitored.
3. The treatment of lymphoedema and chronic wounds has to be integrated with the dermatological care system.
4. For training and education we need financial support.