



SWHS
Serbian Wound
Healing Society



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EWMA
Cooperating Organisation

Report from First Congress for treatment
of chronic wounds with international participation:

Chronic wounds, modern therapy-answers

The First Congress for treatment of chronic wounds in Serbia was held September 23 and 24, 2012, in Belgrade. Belgrade, a city at the confluence of the Sava and Danube rivers, received 400 Congress participants. Invited teachers were from Denmark, Italy, Germany, Lithuania, Austria, Serbia, Croatia, and Slovenia and included experts for the treatment of chronic wounds (CWs), professors Finn Gottrup, Elia Ricci, Dubravko Huljev, Rytis Rimdeika, Harald Daum, and Sarah Rowan. Participants were from Serbia, Macedonia, Montenegro, and Albania. The Congress was accredited (given a Certificate) from the City Health Council and the Serbian Medical Chamber.

The aim of the Congress was the definition, incidences, prevalence, and etiology of distribution of CWs in Serbia, the degree of application of advances in diagnosis and therapy, standard documentation, and the results of treatment. The ultimate goal was laying the groundwork for establishing a centre for the treatment of CWs in Serbia.

The scientific programme of the Congress including multiple sessions: Plenary Programme (definition of chronic wounds, cause distribution), chronic venous ulcers, pressure sores ulcer, chronic ulcers of non-vascular origins, chronic wounds in dermatology, acute wounds, diabetic foot, organisation of the Centre for Wound Healing, innovations in the treatment of chronic wounds, burns and injuries of children, and the roles of nurses in the treatment of CWs. There were three symposiums: antiseptics in the prevention and treatment of wounds and the prevention of intrahospital infections, application of topical negative pressure, and application of alginate compress with honey.

The Congress had three courses: compression therapy in the treatment of CWs, application of modern local therapy and application of topical negative pressure. In addition, the Congress included two roundtables: Centre for treatment of CWs and procedures in the treatment of infectious CWs. There were four poster sessions, two for doctors and two for nurses. For the first time, the Congress held a panel of patients of members of the Serbian Wound Healing Society (SWHS) and diabetic patients in Belgrade. Patients are partners in the treatment of wounds.

The Congress included a European Wound Management Association (EWMA) stand with examples of EWMA Journal No. 12, Vol. 3, October 2012 as well as notices for the 23rd EWMA Congress, May 15 to 17, 2013 in Copenhagen. We are honored that six EWMA Council members participated in the Congress and made a significant contribution to the Congress, including Secretary Dubravko Huljev and members Elia Ricci, Rytis Rimdeika, Nada Kecelj-Leskovšek, and Delic Javorka. In the education programme for nurses working in home care, basic help was provided by Dr. Sebastian Probst, a member of the EWMA Council.

The Scientific Committee selected 40 expert presentations that were published in a supplement of the magazine *Wounds*. The Congress was supported by 12 pharmaceutical companies.

The main conclusion of the roundtables at the Congress, in which invited speakers from several countries participated, was the need for further education and regional/international cooperation in forming basic guidance for the treatment of wounds, education of experts to treat CWs regardless of specialty, formation of a primary team for the treatment of wounds, and an increase in home care treatment for CWs. The Congress materials and conclusions with regard to organisation of treatment centres for healing wounds, which needs the support of relevant state factors, will be sent to the State Ministry of Health.

The second Congress for the treatment of CWs will be held in 2014 in Belgrade, so this is a notice and a call for participation for all colleagues from our country and abroad.

Report from Panel of the patients: The relations between professional staff and patients with CWs; Home care, the relation of the confidence between the patients and nurses

"I have the great honour to report that the first Congress for chronic wounds management was held, and was the first congress where the patients were included!" said Dr. Simon Pandjatić, chairman of the Panel of the patients, plastic and reconstructive surgeon and a member of the SWHS Council.

The topics about patients presented information about issues including what and where the patients were treated; financial burden of the patients and

health system; quality of life of the patients; home care; TeleUlcus; the possibility for the best diagnostic procedures and current dressing; risk factors and comorbidities; and information about CWs.

The conference room included plenty of patients from a club for patients with CWs, diabetic foot, and others, doctors, nurses, and industry representatives. The discussions were very intense and emotional, and included discussion of many individual problems in CW management.

Patient: M.I., 55 years, from Belgrade. He had participated in the discussion about personal experience: "After posttraumatic injuries of the bones on the leg (25 years ago) and osteomyelitis, deep veins thrombosis, arthrosis, I had many chronic wounds, last persisted 5 years. I had 5 operations and my doctors were: ortopedists, plastic and vascular surgeons, internists, microbiologists, physiatrics, dermatologist, and general practitioners. I have been in many hospi-

In early June 2013, the VIII School for the treatment of wounds will be held in Belgrade. The school is the first dedicated to the education of doctors and nurses who work in the service of healing chronic wounds. The school includes international participation, with invited lecturers and participants.

The school will have 15 lectures and three workshops. The lectures are devoted to topics as follows:

- Problem of arterial, venous, decubitus, diabetic, post-traumatic, post-surgical, and other chronic wounds
- Modern diagnostics and therapy (echo, compression therapy, topical negative pressure, use of lasers, hyperbaric oxygen, use of antibiotics, types of debridement, early pediatric home healing, and modern lining)
- Problems of skin care, home care, and prevention methods (comorbidities and risk factors)

The club of patients with chronic wounds of nonvascular and vascular origins are involved with the school, which is organised under SWHS. School participants include pharmaceutical companies, who present drugs and devices for diagnosis and therapy.

The main goal of the school is education, organisation of a centre for healing wounds, improving home treatment, and cooperation with colleagues from the region and other European countries, the EWMA, and other reference organisations in this area medicine.

Lectures and workshop presentations will be published in the magazine *Wounds*, which SWHS has issued since 2007. The school is accredited with the Medical Council, and 50 students will receive certificates.

tals, and that means many expenses. Now, I have chronic wound and oedema. For dressing I used more than 20 different materials and medical treatments. My financial costs are €100 for 1 month. I think that the government must pay for the medical treatments for wounds dressing, and organise one centre for wound management."

The conclusions of this meeting were that the patients are partners in the treatment of CWs. In Serbia, there are more than 60,000 patients with CWs. The inclusion of the patients in all processes for CW management is very important for amelioration the treatment.

Home care services participate in under 5% of CWs management. Demographic data shows an increase in the population older than 65 years, and in Serbia, this is 20% of the total population. This is a source of potential patients for home care.

More than 50% of the patients with CWs are older than 70 years. In this group, 53% suffered from total or partial immobility. Many patients have two or more comorbidities: cardiovascular disease (50%), degenerative disease (30%), metabolic disease (5%), and mental disturbance (10%). Approximately 75% have risk factors for developing CWs.

Analysis of the home care service in the Angiology Department, Belgrade (Delic J, Mikulic V, 2009) showed that 85% of patients were older than 70 years, and 56% of them have CWs of vascular or non-vascular origins. These data showed that we need better organisation of the home care service, greater numbers of professional staff (especially nurses), and a programme for constant education.

We need support to help us organise the programme of education. We need guidelines for CW care, standard documentation, and programmes for prevention.

In Belgrade, we have two services for home care. The first is the Gerontological Centre, which takes care of the population older than 65 years, but this is *general* care for patients who have total or partial immobility. Wound care is included in 8.2% of all visits (a total of 370,000 per year). The most frequent wounds were pressure wounds: oncological, post-traumatic, and venous. Approximately 96% of all wounds were in patients older than 70 years, with an average age of 85 years.

The second home care service is part of *Primary health services* (15 in Belgrade). This is also general home care service, but participation in wound care management is greater: wound care represents 20% of all visits.

Despite these two home care services that provide wound care, Serbia does not have an organised home care service exclusively for CW management.

Our activities for 2013 include organisation of the VIII school for wound management and many workshops for nurses who work in home care services. ■