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EXPLORING THE BARRIERS TO ADOPTION OF NEGATIVE PRESSURE WOUND THERAPY IN THE COMMUNITY SETTING

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Aim: To explore community tissue viability specialist's (TVN's) experiences and attitudes towards the use of NPWT in community settings.

Method: A literature review was undertaken to identify themes and a discussion guide was drawn up prior to the meeting to act as an aide memoir on the day. Invitations to participate were sent to 20 practitioners. The focus group was conducted in a single session with 9 TVN's and lasted for 4hours. It was carried out in compliance with relevant ethical guidelines, participant consent was taken to record the discussion using MP4 players. Three researchers were present one of whom chaired the meeting, the others took notes. The recordings were transcribed verbatim independent of the researchers and compared to the written notes taken on the day for validity.

Results: Data analysis identified numerous themes most notably untimely referrals; cost implications and mutual benefit and understanding with relation to professional and patient experience / attitude.

Conclusions/Discussion: The focus group interview highlighted that NPWT may help to improve patient care and decrease costs associated with numbers of visits. It was stressed that there was a need for clear inclusion and exclusion criteria specific to NPWT use in a community setting. The following inclusion and exclusion criteria were proposed (see table 1).

Table 1: Inclusion – Exclusion Criteria for use of NPWT in the Community

Inclusion Criteria	Exclusion Criteria
Wound assessment	Contraindications
Support	Psychological elements
Patient issues	Home environment
Referrals	Acute vs. Chronic
Funding and Budget pathways	Quality of Life

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THE EFFECT WOUND BED STATUS OF A IONIC SILVER DRESSINGS IN CANCER PATIENTS WITH MALIGNANT FUNGATING WOUND

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Aim: This study examined the effectiveness of a silver ionic dressing on wound bed status of head and neck cancer patients with malignant fungating wounds (MFW)

Methods: A randomized control trial, single blinding and parallel experimental study design was developed and implemented. Subjects were recruited from a 1,000-bed academically based medical center with six special units ward head and neck cancer patients with MFW in north Taiwan. A total of 32 MFW participants were randomly assigned to silver dressing (SD) group (n=14) or non silver dressing group (NSD) (n=18) with a follow-up of two week. Primary outcome variables was wound bed status. Secondly outcome variables was health related quality of life.

Results: There was no significant difference in demographic variables between SD and NSD groups (p>.05). Firstly, a Wilcoxon test for paired observations test was used to examine the change in MFWAT-N from pretest to posttest in each group. Significant statistical differences (t =4.62, P=.001) were demonstrated in the experimental group; while no significant statistical differences (t =26.72, P=.000) was shown in the control group. MFWAT-N, bleed, and amount of exudate was significant difference in demographic variables between SD and NSD groups.

Conclusions: MFW has a negative impact on HRQOL. Hydrofiber dressing that contains silver control malodor, exudates, amount of exudates in patients undergoing MFW palliative period. Further studies exploring a longer term follow up are also required.



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