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Barriers to wound debridement: Results of an online survey

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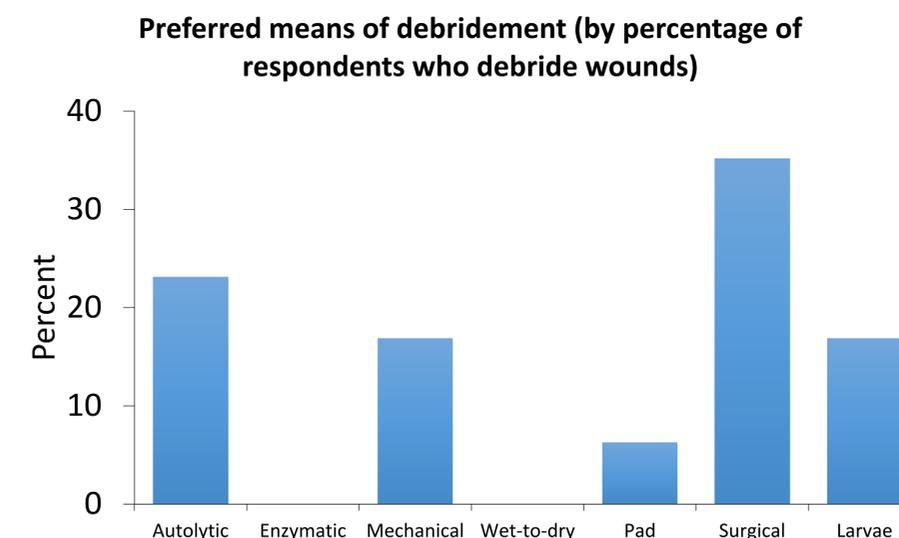
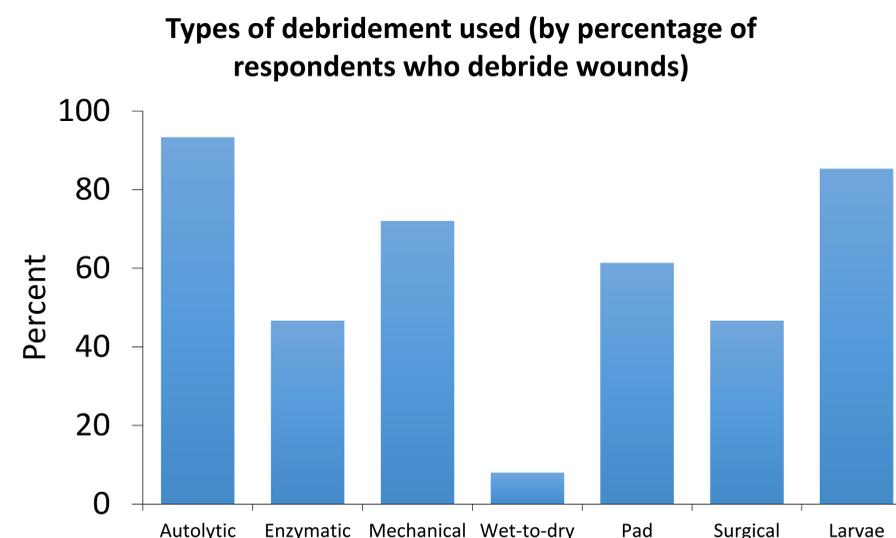
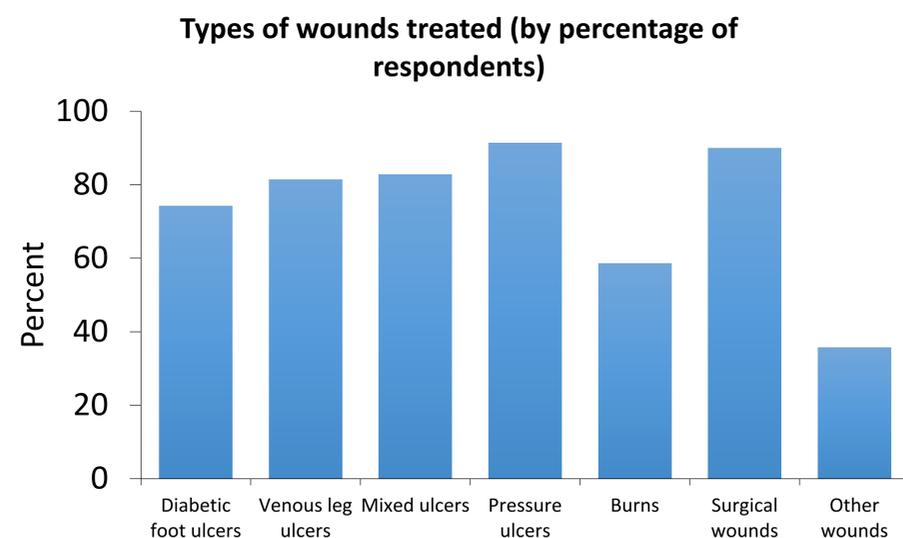
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BACKGROUND: Debridement is the removal of non-viable tissue from the wound bed which assists the conversion of the molecular and cellular environment of chronic wounds to resemble that of acute wounds promoting healing (Schultz et al, 2003). Debridement helps to reduce bacterial burden within the wound, controls on-going inflammation and malodour whilst encouraging formation of granulation tissue thus promoting wound healing (Sieggreen and Maklebust, 1997). This poster presents the results of an online survey which investigated healthcare professionals' knowledge of wound debridement and the techniques used.

METHOD: This online survey, using purposive sampling, was distributed to healthcare professionals working within tissue viability services (n=252) via survey monkey across the UK to investigate healthcare professionals' knowledge of wound debridement and the techniques used. Ethical approval to distribute the survey was received from the School of Human and Health Sciences Research and Ethical Panel. A total of 77 responses to the survey were received (31%). All but 5 respondents practiced in England, 3 in Scotland and 2 in Wales

RESULTS: Survey distributed via purposive sampling to healthcare professionals working within tissue viability services across the UK:

- 77 responses received (31% response rate) representing participants practicing in wound care within various healthcare organisations
- 72 respondents (93.5%), when questioned, debrided wounds
- 71 respondents (95.9%), when questioned, were aware of the TIME concept
- An understanding of debridement and desloughing is limited



CONCLUSION: It is evident that respondents were aware of the importance of preparing the wound bed for the healing process with the majority of respondents using the TIME concept to assist in their assessment. Whilst the respondents recognised the importance of removing devitalised tissue, their understanding of debridement and desloughing is limited. Continued education and the development of skills in being able to safely and effectively debride wounds is essential; however funding cuts to education and limited study time make it difficult for practitioners to secure time away from clinical practice.