

# Palliative wound care

Dear readers

I am happy to present you with the autumn edition of the *Journal of the European Wound Management Association*. This edition is dedicated to the subject of palliative wound care. Palliative wound care is derived from the philosophy and ideology of hospice care and has the purpose of relieving suffering and improving a patient's quality of life when their condition or wound no longer responds to curative treatment.<sup>1,2</sup> Palliative wound care takes a holistic approach, acknowledging the psychosocial impact of wounds on the individual concerned, their family and friends and their clinicians.<sup>3,4,5</sup> It is driven by patients' needs, desires and patient- and family-set goals, which are focussed on the management of wound-related symptoms, addressing pain control, exudate management, odour containment, controlling haemorrhage and the relief of pruritus.<sup>6,7,8</sup>

The management of such wounds and the psychosocial impact of the same will be highlighted in scientific articles. A systematic review demonstrates the possibilities of topical treatment for controlling odour in malignant fungating wounds and the psychological factors associated with malignant fungating breast wounds. Additionally, an article outlines the effects of radiotherapy on wound healing.

In this issue, the hosting society of the upcoming conference — Tissue Viability Society (TVS) — gives us insight into their activities.

I hope you all enjoy this issue.

Sebastian Probst, Editor and EWMA Honorary Secretary  
Professor of Tissue Viability and Wound Care,  
Geneva School of Health Sciences, HES-SO University of Applied Sciences and  
Arts Western Switzerland, Geneva, Switzerland

## REFERENCES

1. Beers, E. H. (2019). Palliative Wound Care: Less Is More. *Surg Clin North Am*, 99(5), 899–919. doi:10.1016/j.suc.2019.06.008
2. Emmons, K. R., & Lachman, V. D. (2010). Palliative wound care: a concept analysis. *J Wound Ostomy Continence Nurs*, 37(6), 639–644; quiz 645–636. doi:10.1097/WON.0b013e3181f90a4a
3. Probst, S., Arber, A., & Faithfull, S. (2009). Malignant fungating wounds: a survey of nurses' clinical practice in Switzerland. *Eur J Oncol Nurs*, 13(4), 295–298. doi:10.1016/j.ejon.2009.03.008
4. Tilley, C., Lipson, J., & Ramos, M. (2016). Palliative wound care for malignant fungating wounds: holistic considerations at end-of-life. *Nurs Clin North Am*, 51(3), 513–531. doi:10.1016/j.cnur.2016.05.006
5. Probst, S., Arber, A., & Faithfull, S. (2013). Malignant fungating wounds: the meaning of living in an unbounded body. *Eur J Oncol Nurs*, 17(1), 38–45. doi:10.1016/j.ejon.2012.02.001
6. Alexander, S. (2009a). Malignant fungating wounds: key symptoms and psychosocial issues. *J Wound Care*, 18(8), 325–329. doi:10.12968/jowc.2009.18.8.43631
7. Alexander, S. (2009b). Malignant fungating wounds: managing pain, bleeding and psychosocial issues. *J Wound Care*, 18(10), 418–425. doi:10.12968/jowc.2009.18.10.44603
8. Gethin, G., Grocott, P., Probst, S., & Clarke, E. (2014). Current practice in the management of wound odour: an international survey. *Int J Nurs Stud*, 51(6), 865–874. doi:10.1016/j.ijnurstu.2013.10.013