
Recent Clinical Techniques, Results, and Research in Wounds

Series Editors

Melvin A. Shiffman
Mervin Low

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Melvin A. Shiffman • Mervin Low
Editors

Plastic and Thoracic Surgery, Orthopedics and Ophthalmology

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Editors

Melvin A. Shiffman
Tustin, CA
USA

Mervin Low
Newport Beach, CA
USA

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Foreword¹

It is a great honour for me to be invited to provide a foreword for the series of six books edited by Dr. Shiffman and Dr. Low, which cover a broad expanse of subjects relevant to and important in the care of patients with wounds.

Wounds have existed since the beginning of time and, until recent years, have received scant attention unless major conflicts developed which necessitated innovation in the treatment of patients with wounds. However, in recent years there has been an increasing interest in this subject as evidenced by the explosion of journals, meetings, societies and associations and initiatives that have been developed in this field.

The need for an academic underpinning of the subject of wound healing is without question. Research papers published in recent years have undoubtedly enhanced the scientific basis for wound healing. This, coupled with demographic changes in many countries around the world, has led to increasing numbers of patients developing wounds or wound healing problems. It is recognised that in the vast majority of geographies globally the number of patients with wounds is increasing in everything other than major burns where better health and safety initiatives have been an effective preventive strategy.

This series of books not only attempts to deal with subjects that are normally seen in wound healing text but also provides a huge amount of space to the management of wounds seen in surgical practice, both general and specialist surgery. The sections on infection are an attempt to deal with a very common but poorly managed clinical problem and one that requires urgent attention in view of the global challenge of antimicrobial stewardship. The tradition chronic wounds are also included and provide a medical as well as a nursing and paramedical focus on these subjects.

It is particularly pleasing to see books and chapters focused on specialised surgical practice as these are areas that are rarely covered in other educational products in this area. The opportunity for new therapies, measuring the range of effective and appropriate outcomes and the use of new technologies are all included.

For those of us who work in the area of wound healing, these books will unquestionably be an important reference source. For those readers who want to get an insight into this common, expensive and complex problem they will without doubt find the content of these books an important source of informed opinion and refer to the rapidly expanding evidence base that is developing in this subject area.

I would urge you to immerse yourself in these books. Read, reflect and consider how information that you have had access to can and will change your clinical practice.

Keith Harding
Clinical Innovation Cardiff (CIIC),
College of Biomedical and Life Sciences,
Cardiff University School of Medicine,
Heath Park, Cardiff,
UK

¹P. S.

We, Melvin A. Shiffman and Mervin Low, are greatly enthralled by Keith Harding's willingness to write the Foreword for the books on wounds. Keith Harding is the Director of TIME Institute (Translation, Innovation, Methodology and Engagement) and Head of the Wound Healing Research Unit in the School of Medicine at [Cardiff University](#). He is Clinical Lead for Wound Healing in the [Cardiff and Vale NHS Trust](#). In September 2013 Harding was appointed Dean of Clinical Innovation at [Cardiff University](#). From 2002 to 2005 he was Head of the Department of Surgery at [Cardiff University](#). He is Editor-in-Chief of the *International Wound Journal*. Harding is a Past President of the European Tissue Repair Society. He was the first President of the European Pressure Ulcer Advisory Panel and first Recorder of the [European Wound Management Association](#). He was Chair of the International Working Group on Wound Healing in Diabetic Foot Disease in 2003. He was Chair of the Expert Working Group that produced a range of International Consensus Documents from 2004 to 2011. Professor Harding was appointed a [Commander of the Order of the British Empire](#) in the [2013 New Year Honours](#) for services to medicine and healthcare.

Preface

We are delighted to have the book on wounds extended into six volumes. There is so very much medical literature in journals and books that to cover the whole gamut of wounds would be virtually impossible. We tried to include as many of the experienced practitioners in wound care as possible, but many of them are too busy to spend the time committing to submitting a chapter.

The selection of topics in each of the volumes was decided by the number of authors responded to each of the subjects. As usual in editing a book, many authors who agreed to submit manuscripts finally were not available to complete the chapters. We contacted or tried to contact over 1500 authors and most of them did not respond or the responses were not as good as expected.

The volumes include:

1. Biofilm, Pilonidal Cysts and Sinuses
2. Burns, Infections and Wound Management
3. Pressure Injury, Diabetes and Negative Pressure Wound Therapy
4. Plastic and Thoracic Surgery, Orthopedics and Ophthalmology
5. Vascular Surgery, Neurosurgery, Lower Extremity Ulcers, Antimicrobials, Wound Assessment, Care, Measurement and Repair
6. Chronic Wounds, Wound Dressings and Wound Healing

There are many expert international contributors who have worked in various aspects of wound research as well as clinical practice. We have tried to have chapters that involved humans and in vivo results and avoided as much as possible animals and in vitro results. Chapter conclusions are those of the authors and may not be the same as those of the editors. At times the chapter may appear cumbersome, but the authors try to show some proof of their results. Language difficulties are common when translated into English so that grammar, spelling and sometimes words have to be corrected.

Hopefully, the reader will get information that adds to their care and treatment of patients. Researchers may gain knowledge of other researchers' progress and improve on the results or can continue their work in other directions. Controversy is many times a good thing since looking in other directions to prove or disprove a result can improve knowledge. We have a long way to go to be able to treat all wounds properly and successfully in as short a time as possible.

Tustin, CA, USA
Newport Beach, CA, USA

Melvin A. Shiffman
Mervin Low

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