

'Woundology' – an emerging clinical specialty

The English Oxford Dictionary defines cardiology as the study of the heart and its functions in health and disease.

Therefore, we could define 'woundology' as the study of wounds and their impact on health and disease.

All clinicians who care for patients with wounds recognise the importance of the development of the treatment of wounds as a clinical specialty. The impact a wound can have on the general well-being of an individual is significant. The costs of caring for wounds are significant even with appropriate care but can be crippling for the health care system when inappropriate and inefficient care is offered to patients. It is therefore important at a global level that this clinical area becomes a focused, evidence-driven clinical specialty. Economically, this is rapidly becoming a necessity rather than a desire from a political, professional and patient perspective.

As a focused specialty, wound healing/wound care/tissue repair/woundology would be given the resources, both for clinical and for research, to drive the evidence required raising the standards of global wound care bettering the life of patients and delivering significant costs savings through-out our health care systems.

Woundology has been a personal crusade of mine for the past 30 years. I believe that the local environment has benefited significantly

during that period. There have been benefits for patients from the local health care system and local industry.

So, my call to all wound carers around the world is to use your commitment for this subject to help make it the specialty it deserves to be.

My challenge to all readers of the IWJ is write to us tell us about your local initiatives that will contribute to the creation of woundology. Share with our readership your efforts and suggestions to help make this happen. A shared vision is much more powerful than many individual visions. What will it take for final recognition of wound care as an individual clinical specialty? How can we as a team strive towards this important goal? What will it take to get the recognition we deserve as a specialty? More questions than answers at the moment but collectively we can drive this objective forward and achieve our goal.

I do recognise that the term woundology is not necessarily appropriate or accurate, but it implies focus and expertise in this clinical area. My second challenge to you is to suggest alternative terms to identify clinicians with an interest and experience in this area.

Keith Harding
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