



## Prevalence of ostomy-related complications identified

One or more complications occur in 35% of patients by 1 year after ostomy surgery, according to a study in *Ostomy Wound Management*.

“**The prevalence of ostomy-related complications 1 year after ostomy surgery: A prospective, descriptive, clinical study<sup>A</sup>**” reports that the most common surgical complication is a colostomy hernia. The use of convexity is more common among patients with a stoma height  $\leq 5$  mm than in patients with a stoma height  $> 5$  mm and among patients who have emergency, as opposed to elective, surgery.



## Braden Scale in long-term care

“**A meta-analysis to evaluate the predictive validity of the Braden Scale for pressure ulcer risk assessment in long-term care<sup>B</sup>**,” published in *Ostomy Wound Management*, concludes that the scale has only moderate predictive validity and low predictive specificity for pressure injuries in long-term care residents.

The researchers examined eight studies with 1,489 residents meeting the criteria to be included in the analysis.



## TMA as an option for diabetic foot gangrene

Transmetatarsal amputation (TMA) is often a valuable option for patients with diabetic foot gangrene who need an amputation, concludes a study in *International Wound Journal*.

The authors of “**The care of transmetatarsal amputation in diabetic foot gangrene<sup>C</sup>**” reviewed 51 articles and note that TMA can prevent “major limb loss and minimise loss of function.”



## CNA education improves pressure injury care

A 1-hour education program for certified

nursing assistants (CNAs) reduces pressure injury and increases reporting of skin breakdown, according to **“Exploring the effect of educating certified nursing assistants on pressure ulcer knowledge and incidence in a nursing home setting<sup>d</sup>,”** published in *Ostomy Wound Management*.

The program, completed by 33 CNAs in a care facility for residents age 55 years and older, included early identification, treatment, and prevention. From 3 months before the intervention to 3 months after, the number of pressure ulcers decreased 12.3%, from 5 to 0, while CNA reports of skin breakdown increased by 68%, from 8 to 17.



## **Exercise and diabetes**

Exercise interventions can improve static balance, lower-limb strength, and gait in older adults with diabetes, reports a study in the *Journal of Diabetes and Its Complications*.

**“Exercise interventions for the improvement of falls-related outcomes among older adults with diabetes mellitus: A systematic review and meta-analyses<sup>e</sup>”** included 10 randomized clinical trials.

## **Depressive symptoms common in patients with chronic wounds**

Symptoms of depression are common in patients with wounds, particularly those with wounds of 90 days or longer in dura-



tion and with pain related to the wounds at initial examination, according to a study in *Wound Repair and Regeneration*.

**“Depressive symptoms in patients with wounds: A cross-sectional study<sup>f</sup>”** reports that 81.5% of the 260 patients had minimal to severe depressive symptoms, with 22.1% having moderate to severe symptoms.



## **Pioglitazone and diabetes prevention**

**“Pioglitazone prevents diabetes in patients with insulin resistance and cerebrovascular disease<sup>g</sup>”** examined 3,876 patients with recent ischemic stroke or transient ischemic attack (TIA), no history of diabetes, fasting plasma glucose < 126 mg/dL, and insulin resistance by homeostasis model assessment of insulin resistance score > 3.0. Patients were randomly assigned to pioglitazone or placebo.

The study in *Diabetes Care* concludes that in patients with insulin resistance but without diabetes who have had a recent ischemic stroke or TIA, pioglitazone decreases both the risk of diabetes and the risk of subsequent ischemic events.

## Identifying risk of lymphedema

According to a study presented at the American Society for Radiation Oncology 2016 Annual Meeting, among patients who have undergone radiation therapy after breast cancer, the risk for lymphedema is highest 2 to 3 years after treatment.

Results from the study, **reported** by Medscape, could affect when clinicians have patients return for lymphedema monitoring.

## Multidisciplinary team improves venous ulcer care

A multidisciplinary team approach to managing chronic venous ulcers increases wound healing, according to an article in the *International Journal of Surgery*.



“**Management of venous ulcers: State of the art**” also concludes that a multidisciplinary team helps reduce wound-associated pain and required daily wound treatments. ■

### Online Resources

- A. o-wm.com/article/prevalence-ostomy-related-complications-1-year-after-ostomy-surgery-prospective-descriptive
- B. o-wm.com/article/meta-analysis-evaluate-predictive-validity-braden-scale-pressure-ulcer-risk-assessment-long
- C. onlinelibrary.wiley.com/doi/10.1111/iwj.12682/full
- D. o-wm.com/article/exploring-effect-educating-certified-nursing-assistants-pressure-ulcer-knowledge-and
- E. jdcjournal.com/article/S1056-8727(16)30637-7/fulltext
- F. onlinelibrary.wiley.com/doi/10.1111/wrr.12484/full
- G. care.diabetesjournals.org/content/39/10/1684
- H. sciencedirect.com/science/article/pii/S174391911630173X
- I. medscape.com/viewarticle/869873

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