



Wound Market Consulting

The International Wound Care Market Specialists

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BELGIUM & POLAND: EXTENDING NURSES' DECISION-MAKING AUTHORITY IN WOUND CARE

The extension of nurses' authority to prescribe wound care dressings increases the need for Industry to deliver accurate and appropriate training in product selection – always a challenge for clinicians when faced with the myriad of products on the market. Belgium and Poland are bringing nurses' authority to prescribe closer to that in other countries in Europe.

The new role of nurses in Poland

The Ministry of Health of Poland and the National Health Fund are finalizing work on the introduction of three new types of medical consultations which will be carried out by primary care nurses; the treatment of chronic wounds, dental and urological consultations. Funding for these services will be released shortly.

During the conference "Qualification of Nurses and Midwives and Patient Health Safety", Maciej Karaszewski, Deputy Director of the Health Department of the National Health Fund, said that the National Health Fund and the Ministry of Health were working together to strengthen the role of nurses in the healthcare system, with new opportunities opening up for this profession specifically in cardiology, diabetology, pulmonology and endocrinology.

Nurses will take the leading role in managing the patient according to the treatment plan set down by the doctor. Qualified nurses will be empowered to, among other things, determine how to treat wounds, prescribe and write prescriptions for certain drugs, and issue referrals for certain diagnostic tests.

The new role of nurses in Belgium

In Belgium the rules for wound care and the procedure for reimbursement of nursing services associated with wound care changed with effect from 1st December 2022.

The new list of categories of nursing care includes 5 types of wound care and a doctor's prescription is not required for the wound care nursing services defined in the new List. A qualified nurse may draw up a prescription for a dressing which is on the reimbursement list for chronic wounds but this must still be approved and signed by the prescribing doctor.

The rules require the nurse to send photographs and reports regularly on the patient's condition so that doctors can also follow the progress of the wound. Deadlines for submission of photos are defined for each type of wound care. For example, on the first day of treatment the nurse must inform the doctor within 5 days and provide a photo of the wound, again at 14 days when extending simple wound care and at 21 days for complex wound care. The nurse must then take photographs every 14 days.

GALNOBAX® GEL WITH ESMOLOL FOR DFUS.

In 2021 NovaLead (<https://www.novaleadpharma.com/>) a drug discovery research company focused on discovering new indications for generic drugs completed a Phase III double-blinded RCT study on the use of Galnobax® a gel with the active ingredient esmolol in the treatment of diabetic foot. Usually the drug is used as a beta-blocker for the treatment of tachycardia. In this study it accelerated wound closure.

The effect is based on the inhibition of the formation of "advanced glycation end products" (AGEs): they occur when glucose in body tissues combines with proteins. They have long been suspected of being involved in impaired wound healing in diabetic patients.

The study involved 27 centres and more than 170 patients with deep diabetic foot ulcers that had been present for more than four weeks. The area of ulcers ranged from 2cm² to 15cm². Nearly half of the patients received the beta-blocker gel in addition to standard care, the other half standard care alone.

The primary endpoint was complete ulcer closure within 12 weeks. In the group where the gel was used, 60.3 percent of patients were able to achieve this goal, in the other group - only 41.7 percent. A positive effect could also be seen after stopping treatment: after 24 weeks, more than 77 percent of the ulcers in the Galnobax®/esmolol group had healed compared to 55 percent in the control group.

INTERESTING TECHNOLOGIES WITH CLINICAL TRIALS

UNDERWAY: A review of studies on DFU newly registered on clinicaltrials.gov between 1st Nov and 1st Feb 23 identified 16 studies. Eight were on topical treatments, 3 of which were anti-microbial, 4 were on imaging, remote monitoring, diagnostic and apps to support self-care, and one each on orthotics, exercise, debridement, and quality of life. A sign of the emphasis on software solutions to support wound healing is that a quarter of the studies are on digital technologies.

Bluedrop Medical: Bluedrop Monitoring System (BMS)

The BMS is a remote thermovisual system, which allows the condition of the soles of the feet to be monitored remotely for thermal visual signs of inflammation. The trial objective conducted by Merlin Park University Hospital Galway, Ireland is to track adherence to use of the system. Full details of the study are available [here](#).

SmartPhone v in-person DFU Monitoring

John Hopkins University is researching the feasibility and effectiveness of a remote monitoring app for the treatment of Diabetic Foot Ulcers. The study compares remote wound monitoring using the smartphone app with in-person wound monitoring in the clinical setting. The primary endpoint is patient adherence with using the app. Full details of the study are available [here](#).

DETEC® Esterase

This disposable device has been developed to detect ulcer wound infection by measuring elevated leukocyte (LE) levels in wound exudates absorbed by wound dressings. The objective of the study at Texas Health Arlington Memorial Wound Care Clinic is to assess the comparative efficacy of DETEC® Esterase against wound care specialists' visual assessment of detecting ulcer wound infection. Full details of the study are available [here](#).

Another estimate of the market value of DFU from Grand View Research

The global diabetic foot ulcer treatment market size is expected to reach USD 7.77 billion by 2030, registering a CAGR of 5.9% from 2022 to 2030, according to this report. The mortality rate associated with DFU is estimated at ~5% in the first 12 months and increases up to 42% by the end of 5 years.

The global market for traditional wound care products was valued at \$5.2 billion in 2020. According to forecasts, in 2026 the market will reach \$6.4 billion (+3.7% per year). The researchers predict that the US and Europe will remain the main markets for conventional wound care products as well as advanced.

National Wound Conferences and Seminars



United Kingdom:
Wound Care Today
1st - 2nd March 2023
[Click here.](#)



Slovenia:
Wound Care Society
24th – 25th February
[Click here.](#)



Lithuania:
Wound Care Association
10th March 2023:
[Click here.](#)



Denmark:
Danish Society for Wound Healing (DSFS)
17th March 2023:
[Click here.](#)



France:
Wound Nurses Meeting:
17th March 2023:
[Click here.](#)



Italy:
XXIV, Joint national conference with EWMA:
20nd to 22st March 2022
XVII AIUC National Congress:
8th – 14th October:
[Click here.](#)