

Study shows specialist clinics are cost-effective for chronic wound care

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A study published in *PLOS ONE* by academics in Australia and the UK, shows that specialist wound management clinics are the most cost-effective route for the care of chronic wounds with better results for patients.

The research team includes Dr. Rosana Pacella, Head of Research at the University of Chichester, West Sussex, UK as part of an international health economics collaboration including Dr. David Brain, and other researchers at the Queensland University of Technology.

Chronic [wounds](#) are often associated with long-term health conditions. Examples include diabetic foot ulcers and venous leg ulcers. The study's authors identified that, in Australia, the majority of Australians with [chronic wounds](#) do not receive best practice care. They found services to be fragmented, with care delivered by a range of healthcare professionals across primary and secondary settings with poor coordination and communication between [health care providers](#).

Source research shows that such a disconnected system leads to high costs due to increased healing times, high recurrence rates, complications requiring hospitalisation as well as reduced quality of life for the thousands of patients affected by chronic wounds in Australia.

In order to address the lack of evidence regarding the cost-effectiveness of a specialist clinic approach to the treatment of chronic wounds, the study evaluated this cost-effectiveness by comparing specialist wound

management clinics with usual chronic wound care. The research team used clinical and administrative data, and published research, as part of the study.

The results show that on average, specialist clinics were \$3,947 cheaper than usual clinics. The results also showed improved quality of life for patients.

Dr. Pacella commented "Current models of care are inefficient and represent low value care. Specialist wound clinics are a good investment and an efficient use of limited healthcare resources compared to current approaches for the management of chronic wounds in Australia."

She added: "While our focus was on the provision of chronic wound care in Australia, our findings could also apply to health services in other countries. In the UK, wounds impose an economic burden on the NHS. Improved models of care, combined with intensified education and training of [health](#) professionals and increased awareness of the impact of chronic wounds, are likely to result in economic benefits and improved patient outcomes in the UK too."

More information: David Brain et al, Cost-effectiveness analysis of an innovative model of care for chronic wounds patients, *PLOS ONE* (2019). [DOI: 10.1371/journal.pone.0212366](https://doi.org/10.1371/journal.pone.0212366)

Provided by University of Chichester

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