Patient access to appropriate treatment is essential, but is an important aspect of the increasing experience of senior doctors who pays to re-iterate their own experiences with the workforce and society on a whole. The European Parliament has made a great number of reports on this subject. The next report of the European Parliament will be on the European Council’s recommendation on Patient Self-care.2

However, there remains a great body of policy work needed to improve patient outcomes. The welfare of each of the patients is life event accurate in sectors where critical care services the difference between long term invalidity and a predictable life. One of the best examples of high-lighting these policy problems is the wound care sector.

Wound care covers a vast area of European Parliament interest. It covers Health Care Associated Infections (HCAIs) which can result from inadequate wound care treatment. It covers long term care as wound care often is a feature of a long period to cover sterility issues as wound care is a specialized segment of health treatment and requires a qualified staff. It is therefore wound care provides an ideal laboratory for developing new policy responses to patient access and requires a qualified chain of care. Therefore wound care is effectively wasted because wound treatment costs are minimised by effective preven-tion. By effective treatment costs are reduced at the same time as patient outcomes are improved. Therefore the European Parliament and the European Commission and Parliament to consider wound care as an indicator treatment for setting healthcare policy and for decision making in relative terms of quality of patient care, we are wound care as a model for making difference in the quality of life. Patient satisfaction suggests that wound care generally and in particular the treatment of chronic wounds is important for health care systems in Europe as the population age. The proportion of people worldwide is highly correlated with age. By 2025, the population of the EU 27 aged 65 and above is expected to increase by 15% (18% of population at a while) and to cause the significant increase in healthcare costs (in particular the treatment of chronic wounds, pressure ulcers, which have an adverse impact on the quality of life and the EU 27 with an annual incidence of 4 million people or 3-4/1000 people, which equates to between 1.5-2.0 million of the 491 million inhabitants of the EU 27 aged 65 and above in 2025). The increase of just 1% in the population as a whole is forecast to cause a significant increase in healthcare costs (in particular the treatment of chronic wounds, pressure ulcers which were developed during hospitalisation). The population prevalence of wounds is between 25-50% of acute hospital beds are occupied by patients with a wound, many of which were developed during hospitalisation. The population prevalence of wounds is between 25-50% of acute hospital beds are occupied by patients with a wound, many of which were developed during hospitalisation. Between 25-50% of acute hospital beds are occupied by patients with a wound, many of which were developed during hospitalisation. The population prevalence of wounds is between 25-50% of acute hospital beds are occupied by patients with a wound, many of which were developed during hospitalisation.

Surgical wound infection is estimated to affect 20-30% of surgical patients (surgical wound infection is 5% of the population). Surgical wound infection is estimated to affect 20-30% of surgical patients (surgical wound infection is 5% of the population). Surgical wound infection is estimated to affect 20-30% of surgical patients (surgical wound infection is 5% of the population). The population prevalence of wounds is between 25-50% of acute hospital beds are occupied by patients with a wound, many of which were developed during hospitalisation. Pressure ulceration has a major negative effect on patient function and quality of life which should be avoided. Between 50%-80% of which are hospital-acquired. Evidence suggests that wound care generally and in particular the treatment of chronic wounds is important for health care systems in Europe as the population age. The population prevalence of wounds is between 25-50% of acute hospital beds are occupied by patients with a wound, many of which were developed during hospitalisation. Between 25-50% of acute hospital beds are occupied by patients with a wound, many of which were developed during hospitalisation. Between 25-50% of acute hospital beds are occupied by patients with a wound, many of which were developed during hospitalisation. Between 25-50% of acute hospital beds are occupied by patients with a wound, many of which were developed during hospitalisation. The population prevalence of wounds is between 25-50% of acute hospital beds are occupied by patients with a wound, many of which were developed during hospitalisation.

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To this end, the Eucomed AWCS calls on the Members of the European Parliament and Commission to consider the following policy measures:

- First, health authorities should support and promote research and exchange of best practice, including information for the treatment of wounds and for prevention of wound complications. This will include participation in international projects and programmes, organisations and identifying methods that achieve best results in this field.

- Support through programmes such as the 7th Research Framework programme would be critical in this regard.

- Second, education for healthcare providers on the importance of wound care is essential for a good quality health system, and there is a need to foster education and training of healthcare workers at Member State level, with particular provisions for healthcare workers specialising in wound care. This means a more holistic approach to wound care as an example of best practice, not just narrow treatment. The recent Green Paper on the Healthcare workforce would be an ideal forum to address this issue.

- Third, the results of seeking the methods and ways of treating wound care should be integrated into the review of availability and access to best practice treatments. Member States should review this as part of their ongoing efforts to identify and promote best practice. This would include exchanging best practice standards for wound care, supported by EU programmes.

Overall, co-ordinated policy coordination and action to improve wound care access and treatment would provide an ideal test laboratory to determine the impact of EU policy on health outcomes.

Eucomed AWCS looks forward to working with the European Parliament and Commission on these important issues.

*About Eucomed Advanced Wound Care Sector Group (AWCS)*

The AWCS is a working group within Eucomed, the “Voice of the Medical Technology Industry in Europe”. Its unique role is the close and active cooperation between the industry and clinicians (represented by EWMA). Eucomed represents directly and indirectly 4,500 designers, manufacturers and suppliers of medical technology used in the diagnosis, prevention, treatment and alleviation of disease and disability. Small and medium-sized enterprises make up more than 80% of this sector. The European medical technology industry invests some €5.8 billion in R&D and employs near 529,000 highly skilled workers. The mission of Eucomed is to improve patient and clinician access to modern, innovative and reliable medical technology.

*About Eucomed Wound Care Policy Paper (EWMA)*

The overall aim of EWMA participation in the Eucomed AWCS group is to represent the clinical voice of wound care to ensure that the implication of wounds from both the patient and clinician are understood. EWMA is a multidisciplinary group bringing together individual clinicians as well as organisations interested in wound management. The main objectives of EWMA are to:

- Share information and implement new knowledge about wound management in order to secure the best possible treatment conditions throughout Europe.
- Secure a continued development of the wound management area by contributing to research into epidemiology, pathology, diagnosis, prevention and management of wounds of all aetiologies.

The activities of EWMA are based on a strong collaboration with the national wound care organisations in Europe and other international organisations with similar objectives. For more information about EWMA, visit [www.ewma.org](http://www.ewma.org).

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**Policy Recommendations**

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