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# The challenges of the multidisciplinary team in preventing surgical wound complications

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Every year, a significant number of patients develop surgical wound complications worldwide, with economic, social and health care implications. With the increase in average life expectancy, comorbidities increase, and the complexity and number of surgeries performed accompany this growth, with an increased risk of developing complications of the surgical wound and therefore prevention becomes an increasing challenge. The early identification of risk factors is essential for an effective management in the prevention of surgical wound complications, and the process is continuous and new risk factors can be identified at all stages of the patient's healing process. This identification depends on the networking of the multidisciplinary team that, from the moment of admission to the total discharge of treatments on an outpatient basis, signals patients with risk factors, helping the decision of the next intervention that is taken as a team.

The interaction of the elements of the multidisciplinary team in health care is fundamental, increasing their quality, which in this way promotes the quality of life of the patient who is subject to the same care. Being a transversal problem in the surgical area, one of the biggest challenges of the multidisciplinary teams is the surgical wound, and in cardiothoracic surgery there are several types of wounds that come from different approaches and interventions and their complications can become a major problem of difficult resolution, with a very large social and economic impact. The major complications of the surgical wounds are infection and dehiscence, increasing on average the hospitalization days by 10 days with a direct economic cost of 19 billion euros per year, to European health systems. In addition, the indirect costs associated with incapacity for work, increased morbidity, and mortality, with loss of family members, leisure time, are impossible to calculate. Prevention programs can be an asset to the quality of health care, promoting the patient's quality of life, reducing the economic and social impact, with the shortening of hospitalization days and the

number of treatments. All team members must be involved to be able to identify warning signs and symptoms.

In Cardiothoracic Surgery at Centro Hospitalar e Universitário de Sao Joao, this work is being carried out, involving the entire perioperative period and professionals from the different teams, who signal patients and their risk factors, so that management plan can be outlined, as soon as possible. A great effort was made by the entire team, with the acquisition of new material, with the training of professionals and with the increase of the interaction of the multidisciplinary team in this area, with mutual sharing of knowledge. This effort has had positive results, with great potential for multidisciplinary sharing and preventive intervention to provide the patient with the best quality of life.

#### **Recent Publications**

- Goncalves V, Lopez E. Nightmares in saphenous harvest veins in cardiac surgery. Cirur Cardio-Torácica E Vascular, 2019, 26(4): 296
- Ramos P, Gonçalves V, Moura A, Vaz A, Ferreira A, Malcato E, Sousa F, Afonso G, Homem-Silva P, Dias V, Alves P Pupro. Prevention of Pressure Ulcers in the PROno Position and in Patients with ECMO and other medical devices in the context of Intensive Care. (Intensive Care – Critically III). Portuguese Wound Care Association, 2020
- Alves P, Moura A, Vaz A, Afonso G, Ramos P, Goncalves V, Pinto M. Pele. The "Temple" that identify and protect us. Portuguese association for wound care, 2021.

### **Biography**

Viviana Goncalves completed surgical instrumentation and anaesthesia graduate programme. She is a member of the European Wound Management Association (EWMA). Viviana is currently employed at the University Hospital Centre of Sao Joao, Portugal, where she oversees the Cardiothoracic Surgery Surgical Wound Dehiscence Prevention Project, which includes all patients, neonates, paediatrics, and adults.

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