From innovation to integration: Shaping wound care in 2026 and beyond

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Welcome to the first issue of 2026. Over the past year, I have reflected on the remarkable growth of the *Global Wound Care Journal.* It has been inspiring to see how our published papers have captured shifting demographics, highlighted new innovations and documented the evolving landscape of wound care worldwide. We read and appreciate the outcomes of randomised controlled trials, crossover studies and cohort studies; while the use of statistics in wound care research is vital for demonstrating the strength of methodologies, numbers alone can sometimes obscure the clinical significance of findings. Stephenson's overview of understanding statistics offered clinicians practical guidance on how to interpret statistical findings with confidence (Stephenson 2025).

Across the globe, there is a clear movement toward data-driven healing demonstrated by the increasing use of smart dressings, regenerative biomaterials, sensor technologies, and digital monitoring. At the same time, the debate around antimicrobial resistance remains central. Many authors, clinicians and industry colleagues have explored the importance of antimicrobial strategies and the responsible use of therapies. Several papers examined both the barriers and enablers of antimicrobial stewardship, emphasising the need for responsible prescribing and raising awareness of antimicrobial resistance in wound care.

Equally vital is the growing emphasis on personalised care and self-care, with artificial intelligence (AI) and remote monitoring now enabling patients to take a more active role in their own wound management. Yet we must remain cautious: AI systems may not always recognise differences in skin tones or account for the co-morbidities that influence healing. Clinicians themselves require education and support to understand the capabilities and limitations of AI. The World Union of Wound Healing Societies is publishing a consensus document *Understanding Artificial Intelligence: Barriers and Potential in Wound Care* (Nair et al, 2026), which provides a unified framework for integrating AI into practice. The authors highlight the increasing global wound burden driven by ageing populations, diabetes, obesity and surgical complications, alongside a projected shortage of 18 million healthcare professionals by 2030. AI is positioned as a tool to enhance efficiency and consistency in care delivery.

The importance of undisturbed wound healing has been debated for years. A consensus paper synthesising the views of more than 100 surgeons worldwide has been published (Morgan-Jones, 2025). This collective work clearly defines what constitutes excellence in incision management and reinforces the value of allowing wounds to progress with minimal disruption. The consensus highlights that careful incision planning, careful and precise closure and the judicious use of dressings are all essential to reducing unnecessary wound dressing interference. By minimising repeated dressing changes, mechanical stress and exposure to external contaminants, clinicians can reduce the risk of infection, improve patient comfort and accelerate recovery.

What is interesting is how the principle of undisturbed wound healing aligns with the emerging role of AI and digital monitoring. Smart dressings and sensor technologies now allow clinicians to track wound status remotely, reducing the need for frequent physical inspection and, therefore, supporting the biological process of uninterrupted repair. Digital platforms can alert clinicians to timely interventions, ensuring care is appropriate. In this way, undisturbed wound healing is becoming an evidence-based strategy enhanced by technology, offering a model of care that is efficient, patient-centred, and globally relevant.

Since our inaugural issue in May 2024, the journal has showcased a diverse range of contributions from scientific research to clinical integration demonstrating the essential link between theory and practice on a global scale. In this issue, conceptual contributions, such as explorations of the ouroboros model applied to dysfunction within the integumentary system, have provided fresh and thought-provoking perspectives on clinical reasoning and assessment.

The peri-wound area has been discussed in clinical practice, yet remains underexplored in research. Papers examining peri-wound skin health, dermatitis risks associated with adhesives and dressings potentially leading to a medical adhesive-related skin injury (MARSI), and investigations into the skin microbiota

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have provided valuable insights, particularly into promoting the healing trajectory.

I am sure you agree that the *Global Wound Care Journal*, the official journal of the World Union of Wound Healing Societies, has provided exciting papers. I would like to thank the editorial board for contributing to the journal and reviewing. I encourage people to publish their work in the journal and to submit abstracts showcasing your best practice, research or conceptual papers to the World Union of Wound Healing Societies Conference being held on 23–27 September 2026 in Kuala Lumpur, Malaysia.

As global healthcare continues to evolve with new innovations, I look forward with anticipation to the next 12 months and the exciting contributions that will shape the future of wound care.

If you have not already done so, please sign up for the journal newsletter at: https://globalwoundcarejournal.com/newsletter and ensure you are up to date with new papers. ●

References

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