## **Editorial**



We appear to have started this year on a high note for a change. Not only has COVID-19 almost become a thing of the past, but I have the privilege of giving you the most exciting and positive news this journal has ever had. At the beginning of my tenure as Editor in Chief of this journal, I made the comment that my primary objective was to get this

journal accredited, despite the seemingly impossible odds to do so. I'm absolutely delighted to report that in December of last year, this immensely important milestone was achieved. As of January this year, Wound Healing Southern Africa is an accredited journal!

Achieving full accreditation status implies that the journal is recognised by the Department of Higher Education and Training, and we can now apply for its articles to appear on search engines, such as Pubmed, Medline, etc. It also implies that if you publish an article in WHSA and belong to an academic institution, then this institution will receive approximately R130 000 per publication.

However, this accreditation status cannot be taken for granted; we, therefore, must ensure that we continue to fulfil the criteria that qualify this journal for accreditation. While we, the editorial team, continue to work in the background to do so, we need **you** to keep on submitting articles to the journal. While we accept interesting case reports/ series, we would like to encourage more original research articles. I'm hoping the journal's new status will see more original research authors considering this journal as a platform to publish their hard work.

On this note, you will find in this issue an article titled "A synopsis of how to undertake research". I urge those of you who have always wanted to get involved with research (but avoided doing so because you didn't know how to go about it) to read this. This has also been chosen as the CPD article of this issue, and I urge you to complete the MCQ related to this article.

Despite us preferring original research articles, interesting case reports are still welcome. We are privileged to have such a wealth of interesting cases in South Africa, so there should be more than enough to publish about. I'd like to remind you of what was said in my last editorial: "In an effort to encourage more of our wound care specialists to submit these cases, the executive committee of WHASA has resolved that any member who successfully publishes an article/case report in WHSA will receive a 50% reduction of their WHASA membership for a year. In addition, the best article published by a WHASA member, will be eligible for free membership for one year."

The number of articles submitted to the journal since the word got out of our accreditation status has already increased, and in this issue, we have a number of interesting papers. Our colleagues from Cuba have partnered with colleagues in South Africa to publish their findings on a large series of cases where epidermal growth factor injections were used in diabetic foot ulcers. This is an exciting field and something you may be seeing more of in South Africa and is worth reading.

Another product seeing an increase in use, although not new, is hypochlorous acid, and there is a paper in this regard illustrating their results in two cases. Another case report details their findings with an infection caused by a very unusual bacterium, *Streptococcus pluranimalium*.

A great research article from one of our wound care practitioners that was presented for the IIWCC selective has also been published in this issue. Lastly, a paper from our colleagues in Kimberley describes an alternative negative pressure dressing for our resource-constrained South African environment.

I trust you will enjoy reading this issue of our newly accredited journal and am convinced we will see even more research articles in future issues.

## **Nick Kairinos**

Editor: Wound Healing SA