

The skin edges are approximated with fingers of the other hand, taking care not to include the gloves in the application process. It is important to practise controlling the applicator and get used to adhesive viscosity. The glue should cover the wound plus about 5–10 mm of skin on either side. Polymerisation takes 30–45 seconds. Two additional layers should be used, with 10–15 seconds between each layer. Full strength is achieved after 2.5 minutes.

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FURTHER READING

Singer AJ, Kinariwala M, Lirov R, Thode HC Jr. Patterns of use of topical skin adhesives in the emergency department. *Acad Emerg Med* 2010;17:670-2.

Conclusion

Careful wound selection and practice of the technique make wound closure with skin glue acceptable in up to 20% of wounds. An increased rate of wound dehiscence is a potential drawback. ◀

Conflict of interest: none declared

Book review

Therapeutic Guidelines: Ulcer and wound management. Version 1.

Melbourne: Therapeutic Guidelines Limited; 2012. 87 pages

The prevalence of ulcers in the community has been estimated to be up to 2% and contributes a significant impost on the health budget. This has led to a general realisation of the importance of not only managing, but preventing this potentially chronic problem. This handbook highlights the importance of not treating the ulcer in isolation, but also considering factors that influence healing and the effects of the ulcer on the patient.

The handbook covers the causes of ulcers and wounds and their management in an easy-to-read and informative manner. It gives guidance on the

role of investigations, antibiotics, dressings and, in particular, management for particular ulcer beds. Importantly, less commonly addressed issues such as pain management are outlined.

The text is supplemented with boxes and figures which summarise assessment and treatment plans for individuals with ulcers. The photos used are true representations of the pathologies described.

The information within the handbook has been extensively researched and is in keeping with international consensus guidelines. The handbook would serve as an excellent adjunct for the specialist, medic and paramedic who has an interest in wound and ulcer management.

Mauro Vicaretti

Head of Vascular Surgery
Westmead Hospital
Sydney

