

Editorial



In this issue of WHSA, we unfortunately say goodbye to a leader, Professor Alan D Widgerow, who has made this journal what it is today. Under his guidance as Editor-in-Chief, Prof Widgerow nurtured this journal from infancy to a successful biannual journal – the mouthpiece of WHSA.

Prof Widgerow utilised his experience and reputation as a highly respected academic and an expert in wound care to muster support from fellow experts to join him on the Editorial Board. This would allow for peer-reviewing, thereby adding credibility to the journal. Despite the journal not yet being accredited by the Department of Higher Education and Training (DHET), Prof Widgerow and his board managed to attract papers from respected authors.

Being the dynamic and innovative individual that he is, Prof Widgerow's successful endeavours in other aspects of his work attracted him to the United States, where he continues to serve as a leader in both the academic and business spheres. Unfortunately, he has found it increasingly difficult to devote time to this journal and elected to step down from his role as Editor-in-Chief as of December 2015.

As the new Editor-in-Chief, I have been given the privileged, yet daunting task of filling Prof Widgerow's big boots and maintaining the standards he set for this journal. This is a challenge that I have accepted and of which I am determined to make a success. I can only accomplish this with the help and wonderful support I have received from colleagues, who have agreed to join me as Editorial Board members, some pre-existing and some new. To them, I owe my thanks.

The biggest challenge this journal faces in the years to come is to obtain accreditation with the DHET. Amongst other benefits, this would allow it to be indexed on search engines such as Pubmed, Scopus, and the like. To qualify for accreditation, the journal needs to prove itself in various spheres over a period of a few years. One example is the need to demonstrate the publication of high quality, peer-reviewed research articles.

Historically, it has not been easy for this journal to obtain many high quality research articles. This is partly because research and publication in South Africa does not enjoy the priority it does in many other countries and partly because wound care specialists who have good papers choose to publish in journals which are already accredited.

Fledgling journals such as WHSA therefore face the proverbial "catch-22" situation, whereby it is difficult to attract good articles because the journal is not accredited. Yet, without publishing such high calibre papers, the journal will struggle to obtain accreditation. The solution is not simple. However, as a plastic surgeon, finding solutions to complex problems is something that I relish and I have set accreditation as my primary goal during my tenure as Editor-in-Chief.

My board and I will formulate a plan going forward to achieve this status and we have already started the process in this issue by ensuring that all articles have been peer-reviewed by at least two reviewers. Reviewers with expertise in the field relevant to the article were selected, thereby ensuring the maintenance of high standards.

In this issue, we see two local case reports which highlight the importance of oedema reduction in wound care. Included also, is an interesting case report demonstrating how toxic Podophyllin can be to tissues when used inappropriately.

In another report, our plastic surgery colleagues from abroad report on innovative ways to deal with amputations, specifically describing techniques and products available to maximise amputated limb length. Interestingly, Africa has the highest number of undiagnosed diabetics worldwide and we therefore welcome the publication of the Cape Town Action Declarations, which are derived by a global task force focused on reducing diabetic foot ulcers and amputations.

This issue makes for some interesting reading, and I trust that you will enjoy it as much as I did!

Nick Kairinos