



# Honey dressing: a missed way for orthopaedic wound care

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To the Editor:

We read the recent article with great interest by Abdel-Salam Abdel-Aleem Ahmed et al. titled “Honey dressing: a missed way for orthopaedic wound care” [1]. They retrospectively analyzed 50 cases having lower limb wounds such as those secondary to open fractures, post-operative wound complications, and infected tibial non-unions. Encouragingly, they showed honey was a promising method of infected wound care in the clinical orthopaedic practice, which provides innovative impetus for orthopaedic wound care.

There are several issues researchers should note in future studies. This study only included patients with lower extremity wounds and did not include wounds at other sites, such as incision infections in the spine. It is well known that wound infection is a major clinical challenge for orthopaedic surgeons, which needs to be solved urgently [2]. However, not all patients included in this study were infected. Future studies should focus on patients with orthopaedic wound infection. Further, preventing wound infection makes more sense than treating it [3]. Thus, when designing future studies, we may consider prevention of orthopaedic wound infection as the primary goal.

While the authors point out that their study lacked a control group, we cannot help but wonder how the control group should be set up. We think that the rational control group should be treated with iodophor gauze dressing. Recently, emerging devices and modalities for wound size imaging were introduced [4]. Moreover, there are many promising image processing tools for smart wound assessment and monitoring [4], which can precisely

calculate the surface area of the wounds. Reasonable wound evaluation will be more helpful to promote the application of honey in orthopaedic wound care.

**Author contribution** Haichao He and Zhengliang Zhang conceived the presented idea. Haichao He wrote the letter. All authors read and approved the final manuscript.

**Data availability** Not applicable.

## Declarations

**Ethical approval** The letter was waived by the Ethics Committee of Dongyang People’s Hospital.

**Consent to participate** Not applicable.

**Consent for publication** The work described has not been published before (except in the form of an abstract or as part of a published lecture, review, or thesis), it is not under consideration for publication elsewhere, and its publication has been approved by all co-authors.

**Competing interests** The authors declare no competing interests.

## References

1. Ahmed AA, Eltregy S, Kandil MI (2022) Honey dressing: a missed way for orthopaedic wound care. *Int Orthop*. <https://doi.org/10.1007/s00264-022-05540-9>
2. Sadigursky D, Sousa MD, Cajarfa YGL, Martins RR, Lobão DMV (2019) Infectious prophylaxis with intrawound vancomycin powder in orthopedic surgeries: systematic review with meta-analysis. *Rev Bras Ortop* 54:617–626. <https://doi.org/10.1016/j.rbo.2017.12.003>
3. Fuglestad MA, Tracey EL, Leinicke JA (2021) Evidence-based prevention of surgical site infection. *Surg Clin N Am* 101:951–966. <https://doi.org/10.1016/j.suc.2021.05.027>
4. Lucas Y, Niri R, Treuillet S, Douzi H, Castaneda B (2021) Wound size imaging: ready for smart assessment and monitoring. *Adv Wound Care* 10:641–661. <https://doi.org/10.1089/wound.2018.0937>

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