TIME

What is TIME?

The TIME framework explores the principles of Wound Bed Preparation and allows clinicians to examine key elements through a structured approach

T- Tissue non-viable or deficient

I - Infection or inflammation

M - Moisture imbalance

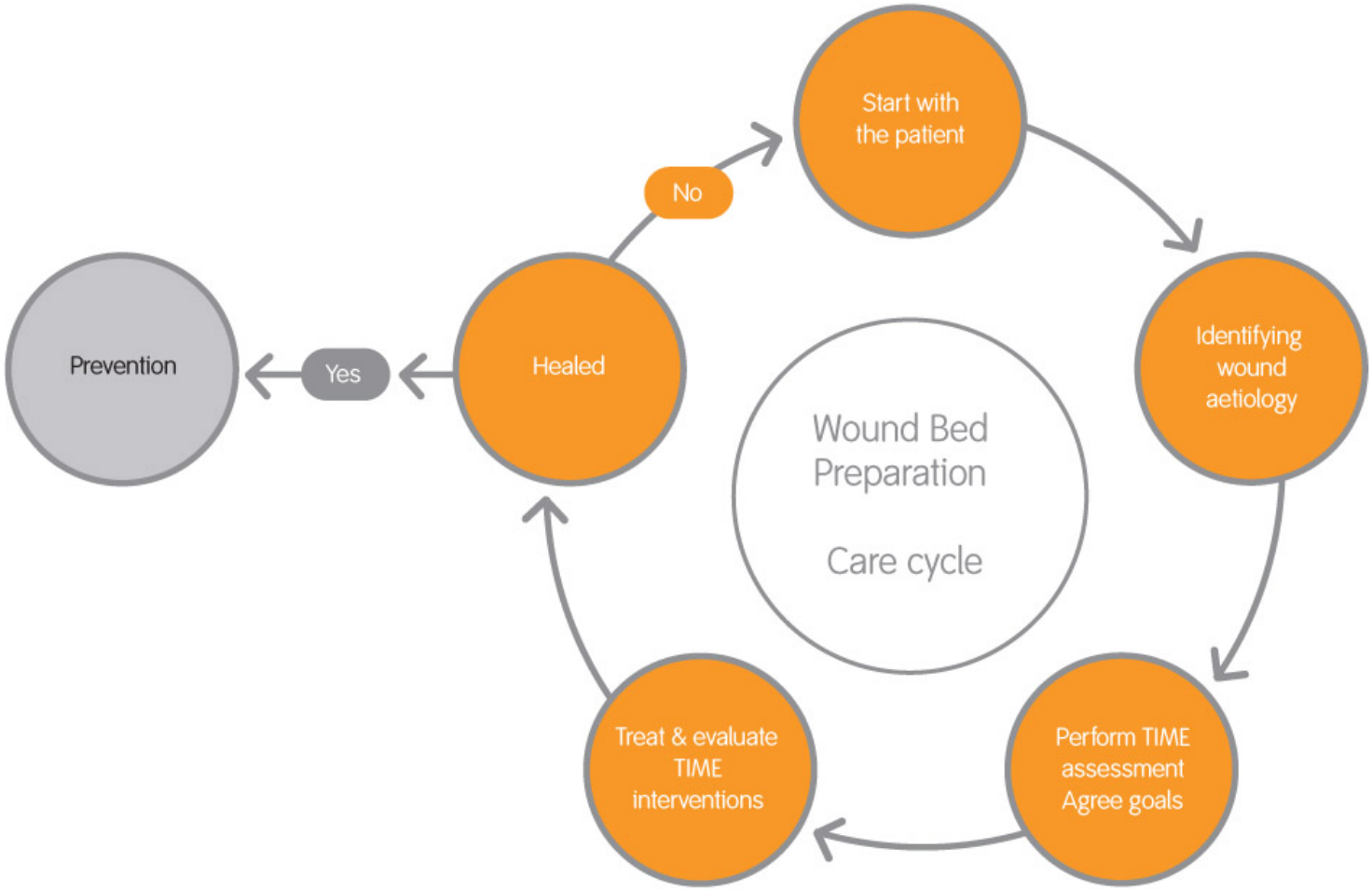
E - Edge of wound non-advancing

TIME*‡ - Principles of Wound Bed Preparation

Clinical pbservations	Proposed pathophysiology	WBP clinical actions	Effect of WBP actions	Clinical outcomes
Tissue non-viable or deficient	Defective matrix and cell debris impair healing	Debridement (episodic or continuous) · autolytic, sharp surgical, enzymatic, mechanical or biological · biological agents	Restoration of wound base and functional extra-cellular matrix proteins	Viable wound base
Infection or inflammation	High bacterial counts or prolonged inflammation ↑ inflammatory cytokines ↑ protease activity ↓ growth factor activity	· remowe infected foci topical/systemic · antimicrobials · anti-inflammatories · protease inhibition	Low bacterial counts or controlled inflammation: ↓ inflammatory cytokines ↓ protease activity ↑ growth factor activity	Bacterial balance and reduced inflammation
Moisture imbalance	Desiccation slows epithelial cell migration. Excessive fluid causes maceration of wound margin	Apply moisture balancing dressings. Compression, negative pressure or other methods of removing fluid	Restored epithelial cell migration, desiccation avoided oedema, excessive fluid controlled, maceration avoided	Moisture balance
Edge of wound - non advancing or undermined	Non migrating keratinocytes. Non responsive wound cells and abnormalities in extracellular matrix or abnormal protease activity	Re-assess cause or consider corrective therapies · debridement · skin grafts · biological agents · adjunctive therapies	Migrating keratinocytes and responsive wound cells. Restoration of appropriate protease profile	Advancing edge of wound

*Courtesy of International Advisory Board on Wound Bed Preparation 2003
Adapted from table 6 – ‡Schultz GS, Sibbald RG, Falanga V et al. Wound Rep Reg (2003)11-28
Wound Bed Preparation and TIME are clinical concepts supported by Smith & Nephew Medical Ltd.

Wound Bed Preparation - TIME in context



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Conclusion

WBP is about getting the fundamentals of wound care right

TIME allows you to think about what influences WBP and what needs to be achieved to promote healing

It is important to remember that the patient remains at the centre of any wound healing process

As health care professionals we have a responsibility to ensure that our wound care practices are up to date and evidenced based.