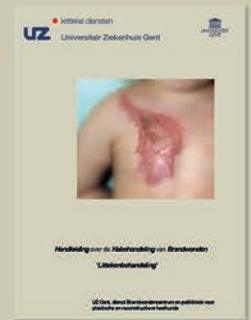


Development of a new brochure making aftercare of burns more understandable for patients

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Introduction:

One of the first questions of burn victims and relatives is whether they will end up with visible scars. Scars are an unavoidable consequence of dermal burns, but the outcome depends largely on the method of scar treatment. This very long and tedious process can only lead to a good result by optimal professional skills and compliance of the patient. We noticed the growing need for a patient brochure concerning the aftercare of burns because an optimal outcome can only be achieved if the patient and family completely understands the reasons behind the treatment.



Methods:

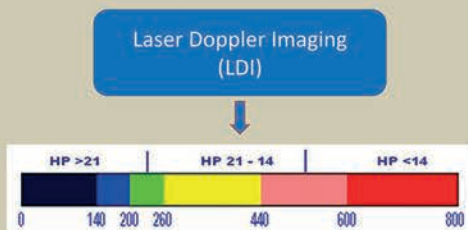


Fig 1: healing time or healing potential

		hydration	UV-protection	Pressure garments	silicones
A	HP <14 days	yes	yes	no	no
B	HP 14-15 days	yes	yes	No	No
C	HP 17-21 days	Yes	Yes	Yes	yes
D	HP >21 days	Yes	Yes	Yes	yes

Fig 2: aftercare related to healing time

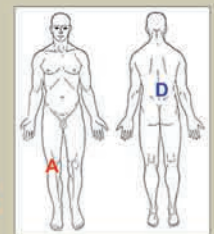
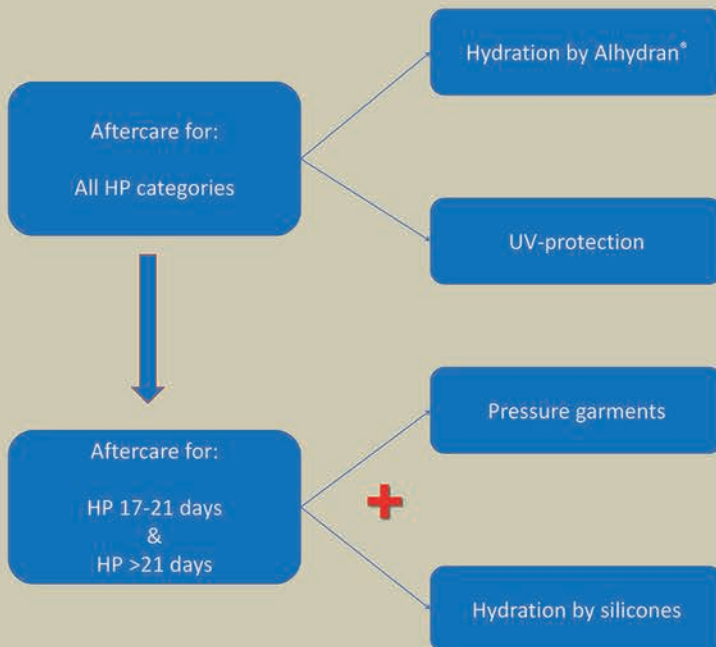


Fig 3: Individual aftercare schedule



Application of Alhydran® 3 times per day in a very thin layer.

'In a recent study, performed in our Burn Center, Alhydran® showed an even better occlusion and hydration of the skin, compared to that of fluid silicone gels'



Scars are very sensitive and need to be protected from UV radiation. The best way to do so is through the regular application of broad spectrum sunscreen with a high protection factor. Protective clothing such as swimwear and t-shirts are also available and effective.



Pressure garments are custom made from high end elastic cotton and are designed to reduce the blood flow in the scars through the application of local pressure (20-24 mmHg). They need to be worn approx. 22h a day. Patients can use the "easy slide" for easier application of the pressure garments.



Silicones are used to improve the hydration of the scars by reducing evaporation through occlusion of the scar. They are often used to increase pressure underneath pressure garments. Silicones come in different forms, such as elastic clothing, sheets, fluid gels and sprays.

Results:

The creation of a brochure, starting with a short explanation about scar development after burns. A subdivision into three groups based on healing potential by laser Doppler imaging and exact healing time is linked to the appropriate scar treatment. With help of a figure in the brochure, showing the exact healing times for the different burned areas, it is easy for the patient to understand what kind of scar treatment is recommended. Finally answers to the most common questions are provided.

Conclusion:

This brochure improves burn patients understanding of scar treatment and improves patients compliance to the suggested treatment. As a consequence, functional and aesthetic outcomes are positively influenced.