FAVOURABLE OUTCOMES WITHOUT PROPHYLACTIC ANTIBIOTICS IN XENOGRAFT TREATMENT OF CHILDREN WITH SCALDS - A SWEDISH NATIONAL COHORT (028)

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Questions: Scalds are the most common type of burn in children, and we treat them with xenografts without topical antimicrobials in line with recommendation in a recent review.(Vloemans et al, Burns,2014) However, the numbers of operations, incidence of wound infection and inflammatory reactions have not been adequately studied.Our aim was to describe the outcome of treatment of scalds, particularly when biological dressings were used without antimicrobials and prophylactic antibiotics.

Methods: This is a prospective clinical cohort study of all children admitted with scalds to a Swedish national burn centre during the period 2010-2012. Patients were divided into those treated conservatively or surgically, and those given antibiotics or not. C-reactive protein and procalcitonin concentrations, and white cell blood counts, were examined during treatment.

Results: Seventy-four children (61% boys) (aged under 2 years with a mean (SD) percentage total burn surface area of 8.5 (6.8) and a mean full thickness burn of 0.1 (0.5) % were studied. 23 cases(31 %) required operation, which significantly increased the length of stay Total burn surface area% to 1.0 (mean) and more antibiotics use(19 cases )(p<0.001).In contrast, the conservatively managed cases had shorter length of staytotal burn surface area% 0.7 (mean). In multi-variant regression model total burn surface area % and need for operation increased length of hospital stay, but antibiotic treatment did not.