USE OF ALHYDRAN CREAM IN THE TREATMENT OF BURN SCARS FOLLOWING A CHEMICAL EXPLOSION - A CASE STUDY (P103)

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Introduction: A 58 year old male had been injured in a chemical explosion. The explosion caused a fire, resulting in flame burns to the skin on his face and hands. Burns to the face were second-degree, with second to third-degree burns on the hands. On admission to hospital, the Burns Centre Maasstad in Rotterdam, treatment of the burns involved the daily use of Flammazine® and changing the bandages until the wounds healed.

The Medical Consultant at the Burn Centre Maasstad recommended continuation of the treatment by a skin therapist specialising in the aftercare of burn injuries.

Methods: The patient complained of extremely dry and itching skin on the face and hands. Due to the burns, his skin felt really tight, and his hands were highly oedematous.

We initiated our therapy in December 2012. The therapy consisted of twice weekly manual lymphatic drainage, bandaging and endermotherapy, followed by the application of silicon sheets (BAP SCARCARE). A hydrating gel-cream (ALHYDRAN) was also applied 4 to 6 times a day as very thin layer by the patient himself (normal 3 times a day). We also applied this hydration cream before and after every endermotherapy-treatment.

Results: ALHYDRAN made the patient's facial skin more flexible. On applying the hydrating cream to his face, the patient reported noticing a difference after one or two hours. His skin felt much looser. The following day, his face was more flexible and "felt great!" His face healed completely, and his hands became more flexible. As the lymphatic drainage and endermotherapy also contribute to the healing process, application of the hydrating gel-cream enabled the skin to be moved freely without tearing. It also significantly reduced the itching. After three months, the skin was noticeably improved; it looked healthier and there was less squamae. The hydration level of the skin was improved, and the patient reported less itching. Treatment was concluded after 18 months.

Conclusions: Burns have been treated successfully using a hydrating-gel cream in combination with lymphatic drainage, bandaging and endermotherapy. The cream is pleasant to use and you don't need to apply a lot of cream. We recommend ALHYDRAN to all our burn patients, because of the excellent clinical outcomes we have achieved over the past few years for itching^{1,2}, elasticity¹, redness¹, due to the proven hydrating properties (hydration and occlusion)³ of this cream.

Our Clinic, De Huidtherapeuten, is a skin- and oedema therapy practice, who qualified in the treatment of burns by passing the 'Skin Therapy After Burns' training course, run by the University of Applied Sciences, Utrecht in collaboration with several other burns centres in Holland and Belgium.

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References:

- 1. Two years' experience with a new product for the hydration of Burn Scars. EBA Congress 2007; Monstrey, S., MD, PhD, Burns Centre, Ghent University Hospital, Belgium.
- 2. "Itching, is there a remedy?", pilot study with a rehydration gel-cream in burns patients. EBA 2007; H.J. van Kempen, RN; Burns Centre Rijnmond Zuid Rotterdam, The Netherlands.
- 3. Scar management by means of occlusion and hydration: A comparative study of silicones versus a hydrating gel-cream. Burns. 2013 Apr 29. pii: S0305-4179(13)00105-8. doi: 10.1016/j.burns.2013.03.025; Hoeksema H, Monstrey S, et al. Department of Plastic and Reconstructive Surgery Burns Centre, Ghent University Hospital, Belgium.