EARLY SURGICAL TREATMENT OF PATIENTS WITH DEEP BURNS OF THE EXTREMITIES (P213)

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Aim: To improve treatment outcomes in patients with dermal burns after an early necrectomy.

Materials and methods: In 277 patients with deep burns of the limbs used the technique of early surgical treatment of primary non-perforated autoplasty autografts on the dorsum of the hands and feet.

Patients at 2-7 days after trauma surgery performed: dermabrasion and necrectomy to remove non-viable dermal layers of skin. Age of patients ranged from 5 months to 67 years. The area of operation to 17%. Necrectomy produced dermatomes with tangential motion, dermabrasion - brushes and a spoon, "Volkmann". After the treatment of burn surfaces were used lipid-kolloyd dressing with silver, on the basis of technology gidrofayber and with ions of silver. The choice of dressing depends on the nature of the wounds of ekssudation, localization of a burn.

Results: Reduce treatment time compared with traditional methods is 2.1 times, the number of dressings decreased from 6-9 to 1-2, decreased pain during dressings.

Conclusions: The use of surgical approach using a silver-containing wound coverings has reduced the time spent in hospital for 7-9 days as compared to conventional treatments. The chosen tactic reduces the risk of nosocomial infection and there is greater comfort for patients.