INTERNATIONAL ABSTRACTS

COULD SERUM CYTOKINES SERVE AS PREDICTORS IN OUTCOME OF THERMAL BURN INJURIES?

The aim of this paper from India was to assess whether serum cytokines can predict the outcome of thermal burn injuries. A prospective study was carried out from January 2016 to December 2016, involving 30 patients with 30–50% total body surface area (TBSA) burns. Proinflammatory cytokines interleukin-1B and interleukin-6 were quantitatively estimated on postburn day 4 and every 5 days thereafter. Proinflammatory cytokine levels were high in patients with higher percentage total body surface area burns. Temporal cytokine profiling revealed significant differences between the pattern of patients who survived and those who didn’t. Reduction in cytokine levels IL-1B, IL-6 in the survival group indicated its recalcitrant nature on treatment and thereby dictated catastrophic outcome. The authors conclude that the temporal analysis of cytokines could serve as a predictor of thermal burn injury outcome.

Babu RJ et al.

BURNS CHALLENGES: A SOCIAL MEDIA-DICTATED PHENOMENON IN THE YOUNGER GENERATION

This article looks at burns challenges, a current youth culture phenomenon propagated by social media platforms such as YouTube, Twitter and Facebook. The authors’ aim was to identify the different known methods of self-inflicted harm leading to burns, the degree of injury and harm linked to these and the extent of influence in social media, and thus create awareness on the subject among all those who work with children and adolescents. They conducted a literature review on PubMed, READ and Epistemonikos with key search criteria including challenges, fire, deodorant, ice and salt and eraser burns. References on each challenge were researched on social media platforms in the non-survival group indicated its recalcitrant nature on treatment and thereby dictated catastrophic outcome. The authors conclude that the temporal analysis of cytokines could serve as a predictor of thermal burn injury outcome.

Chu V et al.
Burns Open, 2(2): 94-97, 2018

RNS CENTRE AND FIRE SERVICES: WHAT INFORMATION CAN BE EXCHANGED TO MANAGE THE BURN PATIENT?

The aim of this article from England was to describe the experience of using a “Burns Extrication Form” at a regional Burns Centre. Communication between the fire services and burns team had previously been regarded as poor. The Burns Extrication Form was devised to provide a clear framework of communication between the two services. Information regarding time frames, exposure to heat and smoke, fire loading (potential severity of a fire in a given space by measuring amount of combustible material in confined space), building construction and chemicals involved is passed to the medical team through a National Health Service mailbox. Treatment provided by the fire service is also documented. This descriptive study looks at data ranging from 2014 to 2017. The information provided in the Fire Extrication Forms helped physicians to assess the magnitude of fire-related injury across the region. It was shown that the fire services provided important first aid as one of the first responders at the scene. Their assessment was found to help clinicians further down the patient’s journey.

Pujii O et al.
Burns, 44(3): 573-581, 2018

THE CLINICAL UTILITY OF EXTRACORPOREAL SHOCK WAVE THERAPY FOR BURN PRURITUS: A PROSPECTIVE, RANDOMIZED, SINGLE-BLIND STUDY

The aim of this article from South Korea was to investigate the effect and mechanisms of extracorporeal shock wave therapy (ESWT) on burn scar pruritus. Forty-six patients participated in the study (experimental group, n = 23; sham stimulation group, n = 23). Patients complained of severe pruritus, ranging from 5 to 10 on the visual analog scale. The experimental group received 1000–2000 shock waves for each treatment with 100 impulses/cm², each with low-energy flux density (0.05–0.20 mJ/mm²) and a 1-week interval between treatments for 3 weeks. The numerical rating scale (NRS), 5D-Itch Scale, and Leuven Itch Scale were evaluated immediately before ESWT and after the third session. Laser Doppler blood perfusion imaging (LDI) was performed immediately before ESWT and after the first and third sessions. The authors conclude that their results show ESWT to be a non-invasive modality that significantly reduces burn-associated pruritus.

So Young Joo et al.
Burns, 44(3): 612-619, 2018