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USE OF RTD IN THE CLOSURE OF RESIDUAL WOUND AREAS AFTER LOSING A SKIN GRAFT AND GRAFTS APPLIED TO SCALD BURNS, IN HYPERTROPHIC SCARRING.

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INTRODUCTION:

Burns are frequent area in pathology which should not worry us at this critical stage, since a large part of its morbidity is determined with the later appearance of after-effects. One of these after-effects appears frequently, fundamentally in profound burns, is the development of hypertrophic or keloid scars. The formation of a scar is a physiological process which takes place in order to re-establish skin integrity. The last part of this process, is known as the maturation phase, which produces itself as a predominant occurrence in the remodeling of the collagen, this is the phase where the change in the phase leads to the formation of inadequate scarring.

The development of a hypertrophic scar generally responds to a regulated change in the healing process. This is associated to a hyperproduction of extracellular matrix.

Generally, the evolution of hypertrophic scars take place frequently in burns and other types of skin lesions, due to the prolonged inflammatory response which happens in those patients.

OBJECTIVE:

The RTD Wound Care Dressing is used in the treatment of wounds and is made up of a polyurethane/polyether foam which is antimicrobial and moisture-absorbing with the addition of the following active ingredients: Gentian Violent (up to 0.25mg/g), Methylene Blue (up to 0.25 mg/g) and Silver Zirconium Phosphate (up to 7.0 mg/g).

The three active ingredients, including silver, which provide antimicrobial properties; have been combined to demonstrate the positive benefits in the healing of wounds. Furthermore, the dressing is hydrophilic and has absorbent properties which create an optimum environment for the healing of the wounds. The silver component in this dressing is not cytotoxic; and can be used throughout the entirety of the healing process for all wounds

METHOD:

The outpatient team carries out the meticulous management of the wounds with various methods, for residual wounds as the result of burns. Treatment protocol was to cleanse with saline solution 0.9%, then apply with RTD™ Wound Dressing, and wrap with HYPAFIX®, over the top part due to sterile absorption. RTD™ was used throughout the duration of the treatment of the wounds (4 treatments).

THE RESULTS:

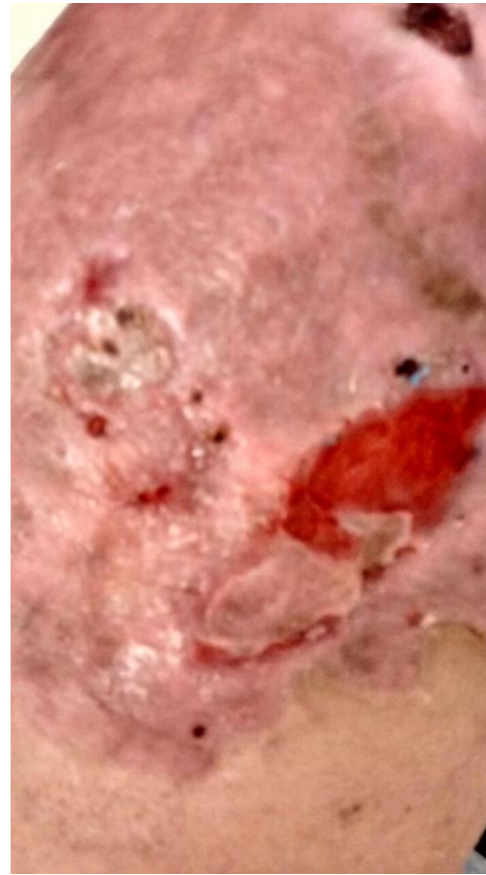
The presentation of a case of a young woman, 19 years of age with a case of burns from oil (Nov 2015), who was presented with keloid scarring of the shoulder which spanned 5% SCT over it, after being operated (TAI 20/04/16) in residual bloody areas after a graft loss.

Four treatments were carried out with the use of RTD wound care dressings- the dates of the dressing changes were: 03/05/2016, 05/17/2016, 06/05/2016, 10/05/16, with complete epithelization of the area to include its bloody areas.

03/05/16



06/05/16



10/05/16



03/05/16

This wound care dressing was used throughout the whole recovery process, and integrated easily into the wound treatment protocol. It reduces the bacterial load and helps to prevent the establishment of biofilm which allows for the wounds to cure without incidence of infection, as well as chronic inflammatory processes.

05/17/16



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