BURNS CAN BE LIFE-THREATENING Burn First Aid



Burns cause cell damage thats occurs shortly after exposure to thermal, chemical and electrical sources. Approximately 130,000 people with burns each year attend A&E.

Follow these steps in the event of a burn:



COOL

With cool running water for 20 minutes can be beneficial

COVER

With cling film or clean dressings



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restore Advancing burn & scar research





Treatment of Burns In Hospital



Here are some of the treatments that your doctor may discuss with you during your stay.

In the UK approximately 10,000 people are hospitalised with burns every year.

Dressings



Dressings are used to prevent infection and maintain moisture. Specialised dressings can be used to mimic real skin. A specific dressing regime will be created according to the location, depth and the need for other interventions such as grafting.

Medications

Medications can be used in the management of the symptoms of burns. Some of these symptoms include; pain, itch and anxiety. These could be given orally or intravenously.





Fluids



One of the skin's major functions is to prevent the loss of moisture. Dehydration is a serious complication of burns. Intravenous replacement of fluids is vital in severe burns.



Surgery

Surgical procedures are reserved for the most severe burns. Large burns may need a skin graft. This is when healthy skin is taken to cover damaged skin elsewhere. Plastic surgeons operate on burns. Not all burns require surgery.

Psychology



A burn can affect how someone thinks and feels, especially in those who have suffered extensive burns or damage to sensitive areas such as the face. Clinical psychologists can help patients develop strategies to handle their mental health.



Rehab

Rehabilitation is a necessary part of the healing process. Severe burns can form thick scars called **contractures.** These reduce your normal range of motion. Physiotherapists can prescribe exercises and use splints to reduce their severity.

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