The treatment of burns and scalds is aimed at the reduction of scarring, preventing disability, reducing the need for further surgery and producing a better cosmetic result. This information aims to answer any queries you may have over the next few months in regard to your child's treatment.

Massaging

Scar tissue contains tiny fibres that cling together in an irregular pattern. Massaging the scars helps to break up the fibres in them, leaving the skin suppler and smoother in appearance.

Massage the scars in small circular patterns for the best effect. The pressure of the massage is dependent on the stage of scar healing. Generally over time the scar can tolerate increased pressure, until skin blanching occurs during massage. It is recommended that all scars are massaged twice a day, for about 15 minutes. Longer massages may be required for larger areas of scar tissue.

Be aware that scars can be very sensitive to touch, however exposure to massage will often assist in the reduction of skin sensitivity.

Extra care when washing helps to prevent a build-up of cream on the skin which could lead to dirt, blackheads, pimples etc. Massaging with cream is a vital part of aftercare treatment that assists to replace the skin oils lost due to the burn injury. Failure to moisturise scars can result in dry, cracked skin that can lead to skin breakdown, new wounds and further scarring.

A non-perfumed moisturizing cream such as Sorbolene with 10% glycerine is recommended for most burn scars. Please speak to your burns team if you have queries or questions. If required, 'oily glycerol' can be provided (contains almond oil) for those scars that are requiring more than moisturising massage to maintain soft, supple scars.

Colour changes of scars

Over a period of time, the scar matures and its colour fades slowly. Once a scar resembles the normal skin colour, it is considered to be mature, no longer requiring specific scar management techniques.

It is important to watch for areas which become an angry red colour as this may indicate infection or potential breakdown of the area. If this occurs it is important for a review to be organised.

Colour changes are common and may be very marked. If your child either becomes warm or cold, the scarring can become a dark purple colour. This is due to its increased blood supply and is harmless. Similarly, injuries on the legs and feet will become purple when the child stands for long periods. Pigment is slow to return to burn scars, and
requires regular review with the Burns team to monitor for hypo (low) or hyper (high) pigmentation.

Sun care

Following any skin injury it is very important to protect the area from the sun. Scar tissue tends to burn more quickly than surrounding skin and this may lead to permanent colour changes in the scar tissue. The most effective means of protecting your child’s skin is to wear clothing that covers the area. Sun cream alone is not adequate.

Scar tissue needs to be protected from the sun for at least two years following the initial injury. Please see additional information on “Sun protection for burn scars”.

Itching

Itching is a result of damage to the skin during injury and repair. The oil glands within the skin do not produce as much oil as normal, leading to skin dehydration. Relief may be offered by:
- ensuring your child wears the pressure garments;
- massaging with cream; and
- making sure your child wears polyester/cotton clothes. It is advisable to avoid nylon and wool as these could make the child hotter and increases the itching.

Medical assistance may also be beneficial if itching continues over prolonged periods. Please see additional information on “Advice for your child’s burn itch and discomfort at home”.

Blistering

Small water blisters may occur on the burned/scalded areas and the donor area. They are common in the early weeks after injury and then tend to appear less frequently. In this case, dressings are required to prevent infection and further wound breakdown. Please call immediately for advice and to arrange follow up (Burns Unit 9340 8257). If your child has ‘pressure garments’ these may need reviewing and remeasuring (Occupational Therapy 9340 8803).

Blackheads

Blackheads are a common problem. They are caused by cream, soap, dirt etc. collecting in the pockets of the uneven surface of the grafted area. They will become less frequent as time passes. Blackheads can be squeezed as necessary, but should not be done more than once a day.

Pimples/whiteheads

These can be caused by an excess of cream or a reaction to products used. Ensuring excess cream is wiped off following massage will assist in managing this problem. Please contact your therapist or medical staff if pimples persist.
Health Facts

For further information, or if you have any questions, please contact your Occupational Therapist on 9340 8803, or the Total Care Burns Unit on 9340 8257.