Activon® Manuka honey in the treatment of a paediatric severe scald to the face and neck

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Introduction

The patient is a 5 year old female with a severe scald to her face and neck obtained on the 31st December 2014 at around 8pm. The exact cause of the injury is unknown as the child was unsupervised at the time; it is thought to be an immersion scald into a large pan of boiling spaghetti. No first aid was given. The patient was taken to the Provincial Hospital in the capital city of Zambales. Her father sought help from LCD Inc, an NGO that we are partners in care with in Botolan, who referred the patient to Triple B Care Projects Inc. The patient was first seen around 10am January 1st 2015. Many thanks to the Doctors for allowing Triple B Care to have access to care for the patient.

Severe scalds to face and neck, oedema threatens airway, no PICU

Sr Val prepared a makeshift treatment area on a vacant bed, then gently cleaned the wounds before using Activon Tulle® and occlusive dressings to the face, neck and chest area. The child had to be nursed in the sitting position to help to drain oedema away from neck so as not to compromise the airway. Regular analgesia was to be administered, in this case the attending Doctor had written up for ketorolac IM. This case was logged on to the Swinfen Charitable Trust (UK) Telemedicine link, of which Val has been a member since 2009.

Jan 5th 2015

The oedema significantly lessened. The burn was mixed thickness, predominantly deep dermal to full thickness (there was white areas) with partial thickness at the edges (red/ deep pink in colour). There was evidence of slough/ damaged tissue on the chin. An increased risk of severe scarring was evident with this burn. Dressing with Activon® Tulle continued, with a high absorbency secondary dressing and cohesive bandage. Contracture prevention and scar management commenced using gentle pressure and a caress maternity napkin to keep the neck elevated/ extended. Activon® Tulle was used as an antimicrobial for infection control and as an anti-inflammatory. The patient and her mother were discharged from hospital and transferred to the Triple B Care Projects Clinic, Castillejos on January 6th. Dressing changes continued as required, with eleven undertaken in total from January 1st to January 31st. The patient and her mother were allowed to go home to their family on February 1st and attend clinic as required, approximately every 5 days.

January 31st The patient was allowed to go home to her family. Scar management and contracture prevention continues for up to 2 years after a deep burn.

Moisture, massage and compression therapy are key components to scar management.

Using a donated pressure garment, worn 24/7,removed only at bath and meal times, dressing change and for laundering

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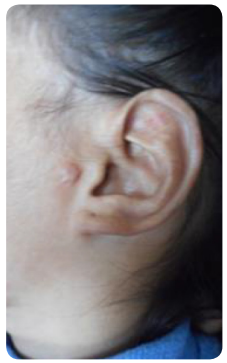
February 21st, wounds are healed, scar management prevails; including the use of Advasil® Conform silicone gel sheets, Siltape®, massage and pressure garments

September 11th; scar management continues

Donated chin strap and moisturizing lotion



Scar management is a long process and instructions must be strictly adhered to for best outcome.

January 2016

Patient (in red) and her family on her 6th birthday. She was taken McDonalds, Iba, to celebrate her 5th (since she missed it in 2015) and 6th birthday!

Jan 1st 2015 - 5th Birthday

2016: The patient on her 6th Birthday - Scar management will continue until further notice.

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