Use of ALHYDRAN cream in the treatment of burn scars following a chemical explosion - a case study

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Background

A 58 year old male had been injured in a chemical explosion. The explosion caused a fire, resulting in flame burns to the skin on his face and hands. Burns to the face were second degree, with second to third-degree burns on the hands. On admission to hospital, the Burns Centre Maasstad in Rotterdam, treatment of the burns involved the daily use of silver sulfadiazine cream and changing the bandages until the wounds closed.

The Medical Consultant at the Burn Centre recommended continuation of the treatment by a skin therapist specialising in the aftercare of burn injuries.

Complaints

The patient complained of extremely dry and itching skin on the face and hands. His skin felt extremely tight due to the burns and his hands were highly oedematous.

Post-burn skin therapy

Our therapy consisted of twice-weekly, manual lymphatic drainage, bandaging and endermotherapy, followed by the application of silicon sheets (BAPSCARCARE).

A hydrating cream (ALHYDRAN) was also applied 4 to 6 times a day as a very thin layer, by the patient himself. (Normal application is 3 times a day.) We also applied this hydrating cream before and after every endermotherapytreatment.

Results

ALHYDRAN made the patient's facial skin more flexible. The patient reported noticing a difference one or two hours after applying the hydrating cream to his face. His skin felt much looser. 'The following day the skin on his face was more flexible and "felt great!" His face healed completely, and the skin on his hands became more flexible. Application of the hydrating cream enabled the skin to be moved freely, without tearing, during lymphatic drainage and endermotherapy, which also contributed to the healing process. The cream also significantly reduced the itching.

After three months the skin had noticeably improved; it looked healthier and there were fewer squamae. The hydration level of the skin was improved and the patient reported less itching. Treatment was concluded after 18 months.

References

- 1) "Two years experience with a new product for the hydration of Burn Scars". EBA Congress 2007; Monstrey, S., MD, PhD, Burns Centre, Ghent University Hospital, Belgium.
- "Itching, is there a remedy?", pilot study on rehydrating gel-cream for burns patients. EBA 2007; H.J. van Kempen, RN; Burns Centre, Rijnmond-Zuid, Rotterdam, The Netherlands.
- 3) "Scar management by means of occlusion and hydration: A comparative study of silicones versus hydrating gel-cream". Burns. 2013 Apr 29. pii: S0305-4179(13)00105-8. doi: 10.1016/j burns. 2013.03.025; Hoeksema H, Monstrey S, et al. Department of Plastic and Reconstructive Surgery Burns Centre, Ghent University Hospital, Belgium.

Conclusions

The burns were successfully treated using a hydrating cream in combination with lymphatic drainage, bandaging and endermotherapy. The cream is pleasant to use and only a thin layer is required.

We recommend **ALHYDRAN** to all our burn patients, because of the excellent clinical outcomes we have achieved over the past few years with regard to itching^{1,2}, elasticity¹ and redness¹. This is due to the proven hydration³ and occlusion³ properties of this cream.



Picture 1: These pictures were taken the first time we saw the patient



Picture 2: These pictures were taken three months after commencing our treatment



Picture 3: These pictures were taken six months after commencing our treatment

De Huidtherapeuten is a skin and oedema therapy practice. Our therapists are qualified in the treatment of burns and hold the 'Skin Therapy After Burns' diploma from the University of Applied Sciences, Utrecht, which collaborates with several burns centres in the Netherlands and Belgium.*



