FACIAL BURNS AND ENZYMATIC DEBRIDEMENT: PRELIMINARY CASES

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Objectives

Facial burns represent a big challenge. Traditional surgery, dermabrasion or water jet method are still considered the gold standard treatment, however Enzymatic Debridement (ED) allows early burn eschar removal after admission, respecting the remaining vital structures, especially dermis, fundamental for scarless healing.

Methods

From February 2017 to June 2019 we have performed enzymatic debridement on selected facial burns within 72 hrs after admission (see Protocol below).

Results

A total of 14 patients were treated (12 adults and 2 children), most of them had other burn injuries including upper airways involvement. (Tab.1)

None of them needed operating theatre for enzymatic debridement procedure. Homografts were applied as a biologic dressing. No blood transfusion was necessary. One out of 14 patients had a deep burn of the nose and needed treatment with a dermal substitute. A spontaneous wound healing was achieved within 14-20 day after injury.

Conclusion

Although not sufficient, our preliminary experience encourages to perform early ED, permitting preservation of vital structures, avoiding escharotomies for circular deep burns, reducing functional and cosmetic sequelae.

Table 1

N. of Pts	14 (12 adults \ 2 kids)	PROTOCOL
Age	54,1 yo (1.5-92 yrs)	Burn Centre or ICU admission and evaluation of the burn injury
MF	10M \ 4F	ED within 72 hrs
TBSA %	27.86% (3-85%)	Skin biopsy before and after ED
TBSA treated with ED	19.6% (3-55%)	Dressing with Homografts
Mean Hospitalization	33 days	Autologous skin grafts if needed