







## Experience with Suprathel in burned children treated in a period of 15 months.

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Sumary: Nonfatal burns are a major cause of morbidity. Burns occur mostly in the domestic and work environment, these types of injuries are preventable. The most affected group from 0 to 5 years old, the mortality rate is seven times higher in children, in Mexico they occupy the 3rd place of death due to accidents in children... they are caused by hot liquids, fire, and electricity, the place where they happen the most is the house. For every person who dies, 219 suffer non-fatal burns.

Treatment must be specialized according to established protocols, second degree burns may be adequately cured with topical therapy or advanced dressings

<b>Patients</b>	N= 30				
Gender	Male	Female			
	14 (47%)	16 (53%)			
Time	first 24				
burnedt	hrs	24 hrs			
	13 (43%)	17 (57%)			
etiology	Scald	Fire	Electricity		
	23 (76 %)	6 (20%)	1 (3%)		
Density					
agent	Food	Water			
	11(47%)	12 (53%)			
SCTQ %	20%	10-20%	0-10%		
	2 (7%)	16 (53 %)	12 (40%)		
		1-5 years			
Age	0-1 years	_	6-10 y. old	10-18 years old	
	3 (12%)	20 (64%)	5 (16%)	2(6%)	
			Upper		
Topography	Face	Trunk		Buttocks and genitale	
	15	14	5		9
Healing	7 days	10 days			
	12	18			

## **MATERIAL AND METHODS:**

Pediatric burn patients who attended the Burn Unit in the period from January 1, 2021 to March 30, 2022,

with predominantly superficial mixed second-degree burns, were included. Previous analgesia, manual debridement, cleansing with antiseptic solution, suprathel placement, cover with secondary dressing (xeroform), support bandage, and 5-day revision were carried out.



Healing



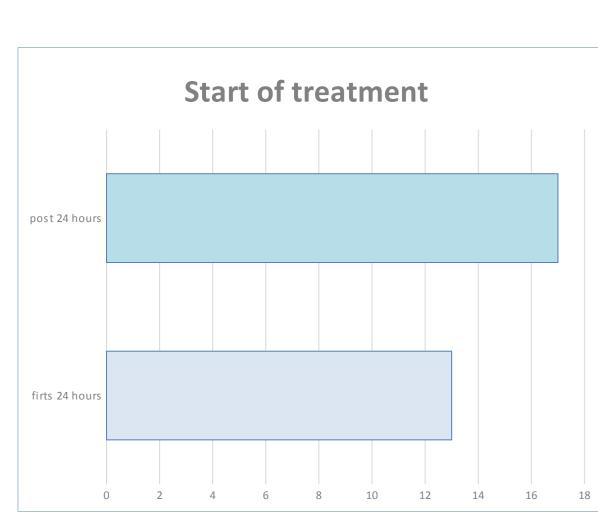






## **Discussion:**

Most affected group males under 5 years of age with scald scattered burns, the most affected segment, face, and anterior trunk, treatment with Suprathel in superficial burns were healed at once. There were no sequels in 2 patients who had already received previous treatment, which had more than 24 hours of evolution, pathological scars were observed in some areas, in 2 patients with more significant extension Suprathel was used in more specialized areas.

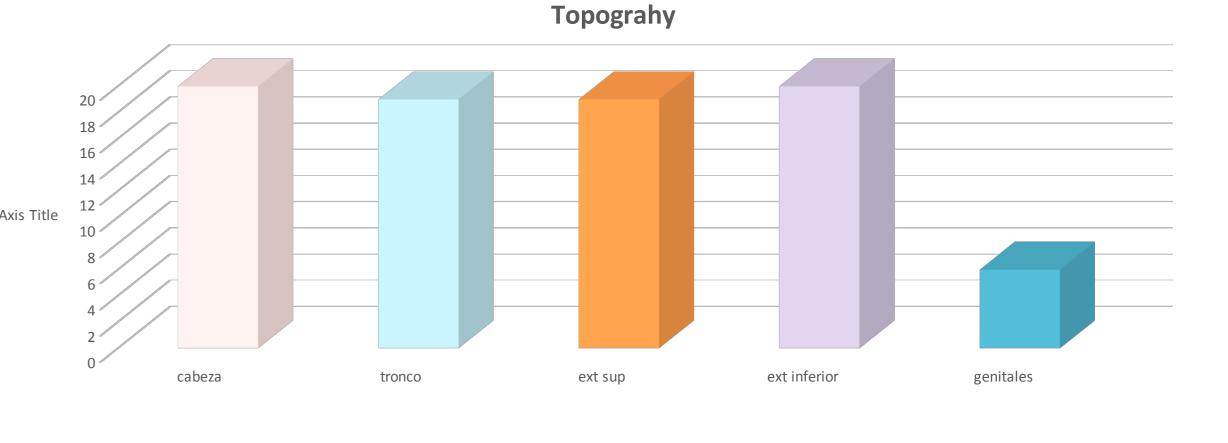


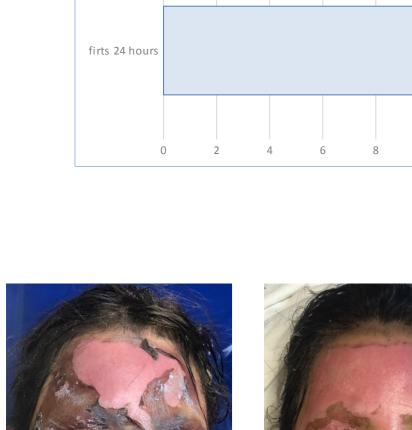






10 dias









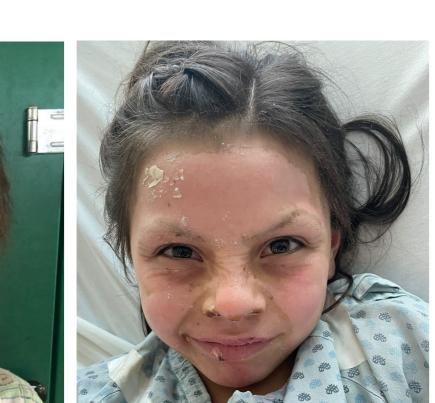


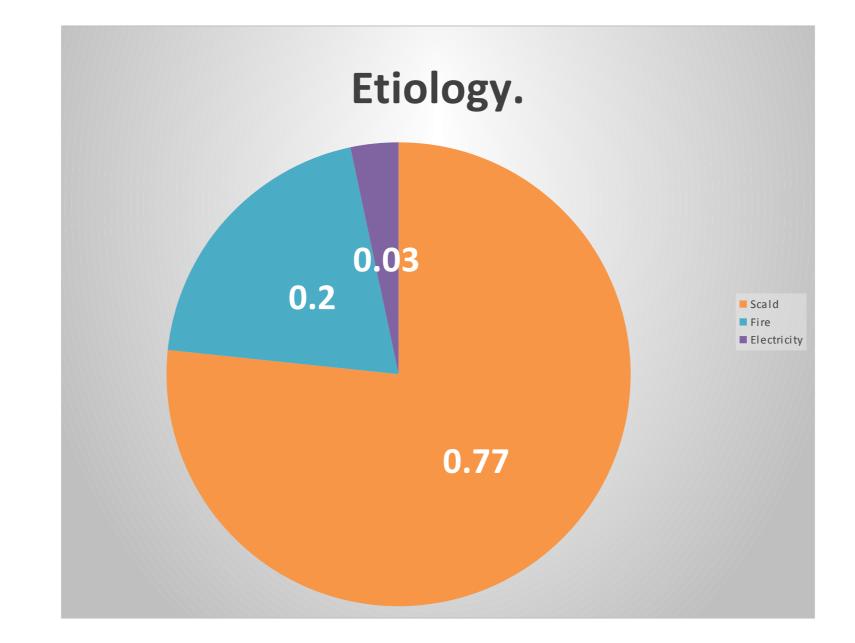


















## Conclusion

The use of suprathel is an excellent alternative for patients with scattered burns, in special areas, in mixed thickness burns with a superficial predominance, it does not cause pain, it can be easily visualized and left uncovered in older children. In a single healing process, it achieves the definitive treatment, as it is a biosynthetic dressing in the form of a microporous membrane composed of a polylactic copolymer, trimethylene carbonate, and E-caprolactone, it is degradable, protects, maintains the temperature, decreases liquid loss, avoids accumulation of exudate and prevents infection healing once. the efficacy of suprathel is very successful for study purposes we only report until March until August 2022 we have 50 patients treated with this dressing.