

BACKGROUND

Major burns induces a hypercatabolic state due to the extensive damage of skin. In order to provide adequate nutritional needs; various guidelines and formulae exists.^{2,3} The enteral route is preferred due to its benefits. Although advances in burns care have improved mortality from major burns; this is not the case in Low and Middle-Income Countries (LMICs).

AIM

To present our experience in the management of patients with major burns at the National Orthopaedic Hospital Enugu using our nutritional protocol.

METHODS

This is a retrospective case series of 2 patients with major burns- 75% and 81% TBSA managed within our hospital. The Sunderland formula, dividing it into two parts, providing a half as eggs (boiled) and the other half as a high protein beverage (whey protein). Twice weekly weighing, weekly serum proteins and albumin was done in the patients.



Fig 1: Eggs, Whey Protein and Milk Formula

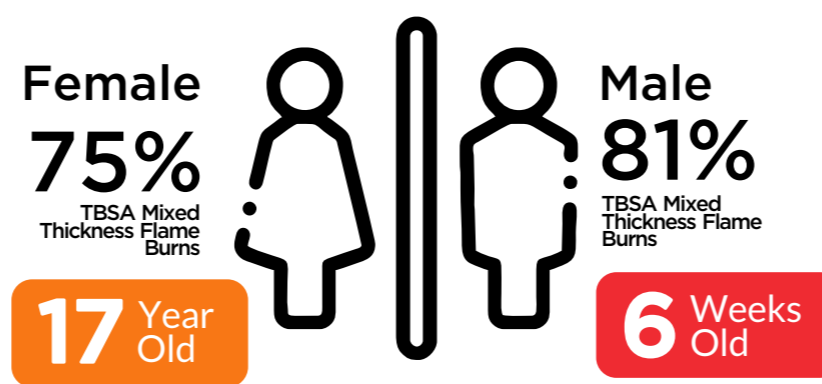


Fig 2: Blending Process



Fig 3: Protein Milk Shake

RESULTS



Duration of Wound Healing

3 Months



Length Of Hospital Stay

2 Months



Fig 7: Female Participant after intervention (Front View)



Fig 4: Female Participant before intervention (Rear View)



Fig 5: Female Participant after intervention (Rear View)



Fig 6: Female Participant after intervention (Front View)

DISCUSSION

Adequate nutrition is a crucial component of burn care because of its benefits.

The high caloric requirement in burns makes compliance difficult. Grammatikopoulou et al. found that compliance with the clinical practice nutritional guidelines of the major burn associations was poor.⁵ One likely cause may be because they were complex. Although eggs are cheap in developing countries, patient compliance is difficult when all the protein requirement is provided as eggs. Other protein rich sources are also available but expensive. Hirshowitz et al. described their administration of a sorely egg diet to achieve caloric requirement.⁶ Kaufman et al. modified this.⁷

When our protocol was instituted, diet was easy to prepare and administer. In complaint patient including the index cases, the beneficial effects was seen as weight gain and improved survival.

CONCLUSION

Survival after major burns occurs in resource-poor settings. Although the nutritional need is increased in major burns, measures to make intake easy for the patients will ensure compliance.

RECOMMENDATIONS

Despite the importance of nutrition, compliance with calculated amounts is difficult. This method of preparing a protein diet will aid compliance.

REFERENCES

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