

Plastic and Reconstructive Surgery Unit

# After a Burn



Booklet of care and practical advice for burns patients on their return to home. During your hospital stay you have been given lots of advice by various health professionals concerning your future wellbeing when at home.

In order to help you in your everyday life at home, we have made up this small guide book which contains information you will have previously received during your hospital stay.

<i>PHYSICAL WELLBEING</i>	<i>4</i>
<i>HEALTHY EATING</i>	<i>5</i>
<i>BODY HYGIENE</i>	<i>8</i>
<i>PREVENTION AND/OR TREATMENT OF MINOR INJURIES</i>	<i>10</i>
<i>CARE OF YOUR JOBST</i>	<i>12</i>
<i>CARE OF YOUR OCCUPATIONA THERAPY SPLINTS</i>	<i>14</i>
<i>UNSIGHTLY SCARRING</i>	<i>14</i>
<i>YOUR OUTPATIENT'S APPOINTMENTS</i>	<i>15</i>
<i>OTHER PEOPLE'S EXPERIENCES- "FLAVIE" ASSOCIATION</i>	<i>15</i>

You may not find all the answers to your questions but, don't hesitate to contact us, we will be pleased to try and help and... that way you can also help us improve this booklet!

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Enjoy your read and we wish you a good recovery.

The plastic surgery's nursing and medical staff.

## PHYSICAL WELLBEING

### *Advice on clothing*

It is advised to wear non allergy making, natural fibre clothing such as: cotton, silk, leather or polyester-cotton.

For example: t-shirt, tracksuit.

It is best to avoid woollen (increases itching) and nylon (very irritating to the skin) clothing. The creams that you will be using may stain your clothing, therefore, avoid your favourite or expensive clothes.

### *Sporting activities*

If you're a great sports person, start up again the sport of your choice after having discussed it with your surgeon and the physiotherapist.

Avoid violent sports or those requiring great physical endurance. Your skin is fragile (there is a risk that sweating may create maceration and lead on to the skin breaking down and creating a wound) and you may also risk injuring yourself due to lack of muscle strength.

Gradually start up your activities again and choose walking as a start (always check with your physiotherapist; it will depend on the state of your burns and the stage of healing).

*BEWARE: repetitive movements in certain sports (tennis, cycling increase the risk of skin retraction under the knees<sup>1</sup>) and everyday activities (such as ironing increase the risk of skin retraction in the armpit area)*

Only go swimming when your skin is completely healed, in order to avoid any risk of infection.

<sup>1</sup> Skin retraction: hardening of the skin, this can occur at the very start of the healing process straight after the skin graft right up to the moment of complete healing (between 18 and 24 months)

## HEALTHY EATING

Eat anything that takes your fancy, especially if your weight is still below that previous to your accident.

*But BEWARE: DON'T EAT TO EXCESS, for if a diet rich in protein and calories is permitted, excess in certain foods (such as sweets, cakes, biscuits, snacks, crisps...) may lead to a rapid increase in weight which may make wearing your compression clothing difficult (rubbing of the skin around the joints for example)*

Foods have been divided into 5 groups depending on their nutritional content:

GROUPS	FOODS	CONTENTS
Red	Meats Vegetables Eggs Tofu	Proteins Iron Vitamins
Blue	Milk Cheeses Dairy products Vitamins	Proteins Lipids Calcium
Brown	Bread – pasta Cereals Vegetables Potatoes Proteins	Carbohydrates Vitamins Minerals Fibre
Green	Vegetables Fruits	Vitamins Minerals Carbohydrates Fibre
Yellow	Oil Butter Cream	Lipids Vitamins

Neither food nor group of foods is complete in itself. You need to take food from all 5 groups in the following quantities:

- **Red** > 1 to 2 times a day
- **Blue** > 2 to 3 times a day
- **Brown** > 3 to 4 times a day
- **Green** > 2 cooked and 2 raw a day
- **Yellow** > 1 a day

In order for your skin cells to be able to renew themselves, it is important to have a well balanced diet and to have a good intake of proteins in sufficient quantity.

If you are vegetarian you need to replace meat with other foods from the **Red** group:

- Fish
- Eggs
- Tofu or other tofu based foods

If you don't like any of the foods from the red group, replace them by foods from the **Blue** group:

- Cheese
- Milk
- Dairy products

*NOTE: foods from the red and blue groups are a good quality source of protein*

If you are vegetarian or vegan, you need to include in the same meal cereals and vegetables, for example:

- A plateful of lentils with rice
- A plateful of sweet corn with red beans
- A plateful of couscous with chickpeas.

Here's an example of a typical day's menu:

#### **BREAKFAST**

- Fruit muesli
- Orange juice
- Coffee
- Whole meal bread
- Butter and jam
- Orange juice
- Fruit yogurt
- Tea
- your usual eating habits

#### **ELEVENSES**

- Bar of cereals
- Liquid yogurt
- Pear
- A glass of plain milk

#### **LUNCH**

- Sweet corn gnocchi
- Red bean sauce
- Mixed salad
- Toffy pudding
- Mushroom omelette
- Rice with peas
- Carrotte salad
- Rhubarb and strawberry puree

#### **TEA TIME**

- Strawberry milkshake
- Banana yogurt

#### **SUPPER/DINNER**

- Fish
- Potatoes with parsley
- Green beans
- Apple
- Vegetable soup
- Spaghetti bolognaise
- Grated parmesan
- Fresh fruit salad

### *Think of having protein filled snacks*

#### Dairy products

- Yogurts
- Muesli, rice pudding, tapioca

#### Drinks

- Fruit flavoured milk
- Milkshakes, liquid yogurt, etc

#### Others

- Cheese, ham or other sandwich

Other tricks to bring you a protein rich diet:

#### Add to your soups

- A little melted cheese
- Grated cheese
- Dried vegetables
- Milk
- Powdered milk

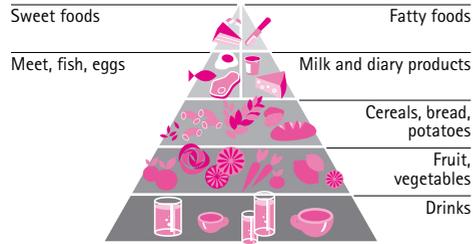
Prepare vegetable, potato and pasta bake with a white sauce and covered in a little grated cheese.

#### Add to your salads

- Hard boiled eggs
- Small cubes of cheese and ham
- Lentils, red beans, dried vegetables.

## The food pyramid

At present many dieticians and nutritionists advise us to balance our diets using the food pyramid.



## Hydration

Drink lots of water, 1to2 litres a day.

Hydration is also very important for your skin.

Try and avoid sweet drinks though! (coca-cola, lemonade etc.), choose herbal teas instead for instance.

## BODY HYGIENE

### Bath or shower?

The bath tends to make the skin go soggy whereas the shower has other therapeutic advantages. With the shower jet you can not only wash but also massage your burnt skin. The shower helps get rid of the flaky bits of skin and therefore will diminish the itching. Different shower heads are available in the shops; each one has a different jet intensity. Whatever happens don't make do with a wash at the basin as it will not be efficient.

Avoid very hot water and choose instead luke warm (to cold) water, your skin will be firmer.

Make sure you have a separate flannel and towel for the parts of your skin that may still have some small open wounds and try and change them frequently. To dry your skin make sure you pat it rather than rub it as it is delicate.

### Soap – body milk – bath oils?

Until you have no more open wounds it is advised to use the disinfectant soap that will have been prescribed for you on leaving the hospital (Lifoscrub).

Later choose a soap with a low pH. Perfumed soaps tend to make your skin go itchy. After washing it is very important to rinse your skin thoroughly as the soap will otherwise dry out your skin. After every shower feed your skin with a body lotion; this will enable it to be more comfortable and supple and your everyday movements easier.

Hydrate your scars at least twice a day and massage the cream in as has been shown to you. Use the prescribed creams (such as Nivea®, Cremol Ritter® lotion, Eubos®, Purriced® –Uriage-).

Don't forget to also hydrate the areas when a skin graft may have been taken from. Avoid talc as it tends to dry out the skin.

In any case it is not advised to add layers of different creams as the scarred skin will be "suffocated" by them. It is best to wait for the cream to sink in before putting on the jobst.

For men it is advised to use an electric razor, less traumatic to the scarred skin, and to avoid after shave.

For women we advise against thick layers of make-up that can "suffocate" the skin(cf the chapter on unsightly scarring).

Body hair removal: it is advised to use hypoallergenic products that will have previously been tested on a small bit of scarred skin. And ask your pharmacist and chemist for advice.

### Heavy perspiration

Despite the fact that grafted skin hardly perspires, it seems that the healthy skin can in some cases compensate by perspiring heavily. Therefore a good choice of clothing and a daily shower can help reduce the discomfort of it. If despite this you continue to perspire and you feel uncomfortable talk to your pharmacist or chemist you may suggest a cream or lotion with a prolonged efficiency.

## PREVENTION / TREATMENT OF MINOR INJURIES

### *Exposure of scars to the sun*

Draconian measures have to be taken for the 1st year:

- Long exposure to the sun forbidden
- Brief and protected exposure only (total sun block + t-shirt and sun hat)
- Beware of "fake friends": the parasol (UV rays get through!) and as for UV rays before exposing yourself to the sun = CATASTROPHE!

### *Prevention and treatment of blisters*

By wearing your jobst you will avoid the risk of blisters forming which will be a nuisance to you.

In case of small wounds, abrasions or blisters forming the thing to do is:

- To find what has caused it and bring it to an end
- Do not make a hole in a blister as it is a protection against infection
- Disinfect the area with a non alcoholic product, cover with an occlusive dressing and consult a specialist (burn's centre).

### *Itching*

Is usually due to the healing process. If it's a nuisance you may:

- Apply a cold wet towel
- See your doctor who will prescribe a medicine (generally you will have received, on leaving hospital, a prescription for an medication against the itching: eg Tavegyl®, Claratine®).

### *Manual tasks*

To avoid the risk of blisters or grazes occurring wear gloves for washing up, gardening, do-it yourself and sport.

### *"Miracle" remedies*

There are a lot of beliefs about burns treatment. If in certain cases pain seems to be diminished, no "miracle" remedy has yet been able to replace efficient medical treatment to try and regain a perfect skin texture.

Don't be influenced by all the advertisements regarding beauty products. Strictly follow the advice given by specialists or other burn's patients.

## PROPER CARE OF YOUR JOBST

### *How to take care of your jobst?*

#### Aim of that clothing

Compression avoids the "swelling", thickening of the skin. Vascularization (formation of small blood vessels under the skin) is better organised. Don't rub or massage the skin to avoid it going red and also to avoid any itching.

#### If you don't wear it

Healing becomes unsightly and deformed. The skin's reshaping process will take longer.

#### How long do you have to wear it for

Depending on the skin type and the person's healing process, this clothing will be worn 24hours a day, for about 10 to 24 months. Towards the end of treatment the clothing will be worn less and less.

Look at this clothing as a special wool jumper and take as good care of it. Two jobst will have been made for you, therefore try and change it every day.

Wash it with a soap for delicate clothing, rinsing it thoroughly and leaving it to dry (you may ring it out in a towel). It is advised to hand wash it. It is not advised to use a hair dryer, a radiator or direct sun light to dry it, as this will harden the elastic fibres in the jobst and therefore diminish its efficiency.

When putting on the jobst, or any other compressive object, make sure it is put on correctly without any folds or unusual pressure points. The first days are the hardest as the scarred skin has to get used to it; some people refuse to wear them. But the medical and nursing team then notice a great increase in complications with the healing process and skin retractions as well as "swollen" and unsightly and painful scarring.

### *Face mask*

#### Aim

The face mask is required when you have a facial burn injury. The aim of it is to prevent hardening of the skin and skin retractions (these can occur for example around the mouth, shrinking of the skin on the neck)

#### Taking good care of it is an absolute necessity

- It has to be removed and cleaned in warm soapy water everyday (do not use chemical solvents as they are bad for your skin)
- Dry it with a cotton towel
- Put it back on to dry skin when the cream has been absorbed
- Keep the mask away from all hot objects so as not change its shape or stability of action.

*You will have to wear these clothes 24h a day for 6 months to a year. It will seem long and difficult at times but the results will be worth it. When you will see your scars flatten out and your skin take on the same colour more or less everywhere YOU WILL KNOW YOU HAVE WON ANOTHER BATTLE in the healing process.*

## TAKE PROPER CARE OF YOUR OT SPLINTS

You have been given various splints, prescribed by our doctors and made by our occupational therapists, which will require the same care as the face mask:

- Daily wash with warm soapy water.
- Drying with a cotton towel.
- DO NOT DRY WITH A HAIR DRYER or any other heating object as it could change the shape of your splint, meaning it would no longer be therapeutic.

## UNSIGHTLY SCARRING

Each person has their own healing process, therefore for several months your skin may remain delicate.

The wearing of your jobst is an absolute must in order to regain a smooth skin and a less red colouring. There are several possibilities when it comes to improving some of the scarring (about a year after the final treatment).

Learning to apply special scar make-up may help you feel more comfortable with your image. There are several brands of cosmetics selling hypoallergenic make-up for hiding scars. At the CHUV we are able to contact representatives for these products who will come and show you how best to use them (by appointment only.)

## YOUR OUT-PATIENTS' APPOINTMENTS

In out-patients you will generally be seen by the doctors who looked after you during your hospital stay. A nurse from the plastic and reconstructive surgery ward (CPR) is also there to answer any questions you may have and any needs that have risen since leaving the hospital.

A nurse from CPR will contact you by phone once you are at home to make sure that all is going as well as possible.

If you need to renew a prescription (physio, OT, drugs, dressings and/or jobst) don't hesitate to ask while you're at your out-patient's appointment.

## "FLAVIE" ASSOCIATION

Nursing staff and doctors from the burn's unit and the plastic and reconstructive surgical ward from the CHUV hospital, Lausanne, as well as ex-patients got together and set up this association in March 2003.

You should have received one of these brochures on leaving the hospital.

In the next pages you will find the stories of some of these burn patients who are also members of the association.



### FLAVIE

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## PASCALE TISSOT

My story,

5th May 2002... It was to be a new start in my life! I had decided to go backpacking through south east Asia. I travelled through Thailand, Malaysia, Singapour, Cambodia, Laos and Vietnam before ending my journey in Bali, Indonesia.

Bali, Island of the Gods, a place where I thought nothing could happen to me... well it wasn't to be the case!!

It was on the 12th October 2002, on a Saturday evening... That day I'd decided that I would go and party, like all the other young tourists around...

It was about 11pm (local time), I was quietly having a drink in the Sari bar when suddenly there was a loud BOUM... and another BOUM... I was lifted in the air and fell to the floor where I was trampled... I didn't know what was going on... People were screaming, shouting, crying for help. I had just become the victim of a terrorist attack. Later I was to find myself in a hospital in Denpasar having been taken there by a young lady on a scooter... Tourists were arriving one after the other, it was a real "carnage"... At that moment and time I didn't realise how badly hurt I was. I had been burnt, but to what extent? A little, a lot, on what parts of my body? I still didn't know. After several hours of suffering, I was brought back to Switzerland by

the Rega. It was the 16th October, my family was by my side at the CHUV... I was in an artificial coma in intensive care and burnt to 60% of my body surface area. A long and difficult path were awaiting me... But one day I saw light at the end of the tunnel, on 7th April 2003, the day I left hospital.

The joy of being with my family and friends...

Now I have my own flat where I live with my boyfriend and I am happy. I try and live as before but I will never forget that night of 12th October 2002.

My story, my suffering, my new life.



## SÉBASTIEN MAILLARD

My name is Sébastien Maillard, I was born in 1977. My accident happened on 1st May 2000 in the garage where I worked as a mechanic. I worked on big trucks. To think that the year 2000 was to be a great year: I was due to change jobs, get married, move house and travel. All those lovely plans had to be cancelled or put on hold, of course.

It was as I got near to the truck's tank with a flame that the latter caught fire. The tank, by mistake, still contained some petrol. I was burnt on 92% of my body surface area. Apart from my looks, due to the accident, I lost my ears, my nose, 5 fingers and movement in the others. By chance I've kept a good eyesight!

After 5 months spent in the burn's unit (intensive care), I was able to start eating, walking and talking again thanks to the help of my girlfriend Karine, my family and friends who were of great support. My physio and occupational therapy treatment were long and intense (more than 5 hours a day, 7 days a week at the beginning). It was worth it as I have been able to regain full movement without further surgery. Thank you to the physiotherapists and occupational therapists for their patience and perseverance! I was able to leave hospital a year and a half later.

It was in February 2001, while I was still in hospital, that one of my plans for the year 2000 was able to come true. Karine and I got married. In July 2002 my wife gave birth to a little girl, Katline. I can ski as well as roller skate, run, ride a bike and generally live my every day life again.

Despite the bad luck that befell me that day, all has ended well and I can live my life again as before. Being an optimist, I quickly accepted my handicap which enabled me to get straight back into everyday life. In August 2003 I started to learn a new job as a computer expert.

I will never be able to thank the doctors enough for doing their up most to save my life and the nursing staff for their care and support during my long stay in hospital.



It was on our return journey, having been on holiday, that a car crash completely changed the course of our lives. My young daughter was on the back seat, my boyfriend was driving and I was next to him. My daughter was happy, she was going to see her friends again. It was late, we were tired, so we dozed off.

I was suddenly woken from my sleep by a loud noise and found myself fighting flames without realising that we'd had an accident.

I woke up in intensive care after 3 weeks in an artificial coma. I remember hearing voices around me, they were saying: "Mrs Rodrigues! Mrs Rodrigues! Do you know where you are?" "of course I know where I am: on holiday in Spain", "no, you're in hospital, you've been badly burnt and your daughter is still in France as she is too badly hurt to be transferred back."

I immediately understood that the situation was bad and that I had to get better quickly, in order to be with my baby who was needing me.

Little by little I started to realise everything I had lost; and I had the nasty feeling I had been put through the tumble dryer as I felt as if I'd shrunk, incapable of moving, not even a finger. I felt like an open wound with unbearable physical and moral pain. Yet, the suffering was not as important as was the hope of seeing my daughter again. The staff in the burn's unit told me it would take four to five months in intensive care for me to get better. They told me that my getting better would also depend on my moral. A great bond was formed between me and the staff as I participated and contributed to my care. After three to four weeks I was able to go up to the 14th floor to the plastic and reconstructive surgery ward. I found myself in the room at the end of the corridor and what a fright it was to be suddenly on my own without a nurse permanently by my side. So I wondered

if they would know how to look after me, if they had any knowledge of how to care for people in my situation.

The next day I understood that it was to be a new step in my recovery. I was going to have to learn again how to live as if I was a new born just come into the world. Just to make things worse, as if I didn't feel tight enough in my skin I was asked to wear the jobst. It was a blow: the sensation was so horrible that I just wanted to tear everything off, even my skin that was strangling me and preventing me from moving freely. I thought I would never be able to put up with such torture and I thought I'd never get through it all. The nurses kept telling me with lots of love that I would get use to it. Hearing this was a bit like the "last straw", how could they tell me I was going to get through it all when in fact I was in complete despair. I doubted they could be right. The first time I left the hospital it took me an hour and a half just to get down the road to la place de l'Ours, whereas now it takes me 10 minutes like everybody else...



### **Sources**

Care and practical advice booklet | CHUV | CB,  
Lausanne, January 1993. A.Vandervale

Meetings with the multi disciplinary team from the Burns Unit  
and Plastic and reconstructive surgery at CHUV, Lausanne,  
December 2003

Maryline Sonnayn clinician nurse on CPR, December 2003  
2<sup>nd</sup> version july 2008

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