SKIN BURNS AND WOUNDS:

- Skin burn injuries and burn wounds are common, with over one million burn injuries occurring every year in the United States. Skin burns can result from exposure to several possible sources, including hot water or steam, hot objects or flames, chemicals, electricity, or overexposure to the sun.
- Burns were previously classified as first, second, third, or fourth degree, based on the thickness of the skin burned. This system is being replaced with a system as described.

- Superficial skin burns — Superficial skin burns, previously called first-degree burns, involve only the top layer of skin, are painful, dry, and red, and turn white when pressed. Superficial burns generally heal in three to six days without scarring. Example Non blistering Sunburns.

- Superficial partial-thickness skin burns — Superficial partial-thickness skin burns, previously called second-degree burns, involve the top two layers of skin, are painful with air movement or air temperature changes, are red and drain fluid, usually form blisters, and turn white when pressed. The burned area may permanently become darker or lighter in color but a scar does not usually form. Example blistering sunburns.

- Deep partial-thickness skin burns — Deep partial-thickness skin burns, previously called third-degree burns, extend deeper into the skin, are painful with deep pressure, almost always form blisters, and do not turn white with pressure. Deep partial-thickness skin burns take more than 21 days to heal and usually develop a scar, which may be severe.

- Full-thickness burns — Full-thickness skin burns, previously called fourth-degree burns, extend through all layers of the skin, completely destroying the skin. The burned area usually does not hurt, is a waxy white to leathery gray or charred black color, and the skin is dry and does not blanch
when touched. Full-thickness burns cannot heal without surgical treatment and scarring is usually severe.

- Home treatment of skin burns should include cleaning the area, immediately cooling it, preventing infection, and managing pain.

- Clean the area and remove any clothing from the burned area. If clothing is stuck to the skin, do not try to remove it and seek medical care.

- Wash the burned skin gently with cool tap water and hypoallergenic soap. It is not necessary to disinfect the skin with alcohol, iodine, or other cleansers.

- After cleaning the skin, you may apply a cold compress to the skin or soak the area in cool water to reduce pain and reduce the extent of the burn. Avoid placing ice directly on the skin because this can damage the skin further.

- Prevent infection and, apply aloe vera or an antibiotic cream. Do not apply cytotoxic agents to burn wounds.

- Minor burns may be covered with a clean dressing. A dressing that does not stick to the skin is preferred as the primary dressing. Change the dressing once or twice per day, and as needed.

- Do not try to break open skin blisters with a needle or fingernail because this can increase the risk of skin infection.

- If you have not had a tetanus shot in the past five years and your burn is superficial partial-thickness or deeper, you need a tetanus booster vaccine.

- Elevating burns on the hand or foot above the level of the heart can help to prevent swelling and pain. You may take pain medication as advised by your physician.
• Many people are bothered by itching as the burned skin begins to heal. Try to avoid scratching the skin and may use a moisturizing lotion if needed.

• Skin burns can often be prevented by making some changes. Always apply sunscreen liberally and staying out of the sun when possible. Use hats and protective covering to prevent sunburn. Keep lit candles, matches, and lighters out of the reach of children. Keep hot foods, drinks, and irons, away from the edge of counters and tables. Use a cool-mist humidifier rather than a warm mist humidifier. Keep children away from hot stoves, fireplaces, and ovens. Install a smoke detector in your home. Children's sleepwear should be non-flammable. Set the thermostat on your hot water heater no higher than 120ºF (49ºC). If you cannot adjust your hot water heater, install an anti-scald device on your shower, bath, or faucet.

For more information, please read,

American Burn Association

(www.ameriburn.org  <http://www.ameriburn.org/> )