# BURNS TREATED WITH COLLAGEN MEMBRANE

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## INTRODUCTION

Our study records the results obtained with purified collagen membranes applied to 100 patients having up to 5 % of BSA lesions. If the usual treatments are compared with the use of this new collagen membrane, the epithelization time is shortened in type "A" burns and skin donor areas; is remarkable shortened in “AB" type, and in type “B" after scarectomy an accelerated proliferation of granulated tissue has been observed. Neither intolerance reactions nor pain signs could be observed, and the same results were obtained in occlusive and exposed cures. Membrane transparency, permeability and adherence were excellent and helped us to control healing evolution.

## MATERIALS AND METHODS

100 patients were selected: 58/42 male/female between 4-65 years old whose lesions did not exceed the 5 % of the BSA; 35 pts. with "A" flictenular burns; 35 pts. with "AB" burns and 30 pts. with "B" type. Donor sites of grafted patients were also treated with collagen membrane.
During the evaluation period, the following points were considered:
1) epithelization period;
2) infection and colonization;
3) pain;
4) local and general allergy and
5) times of cures.

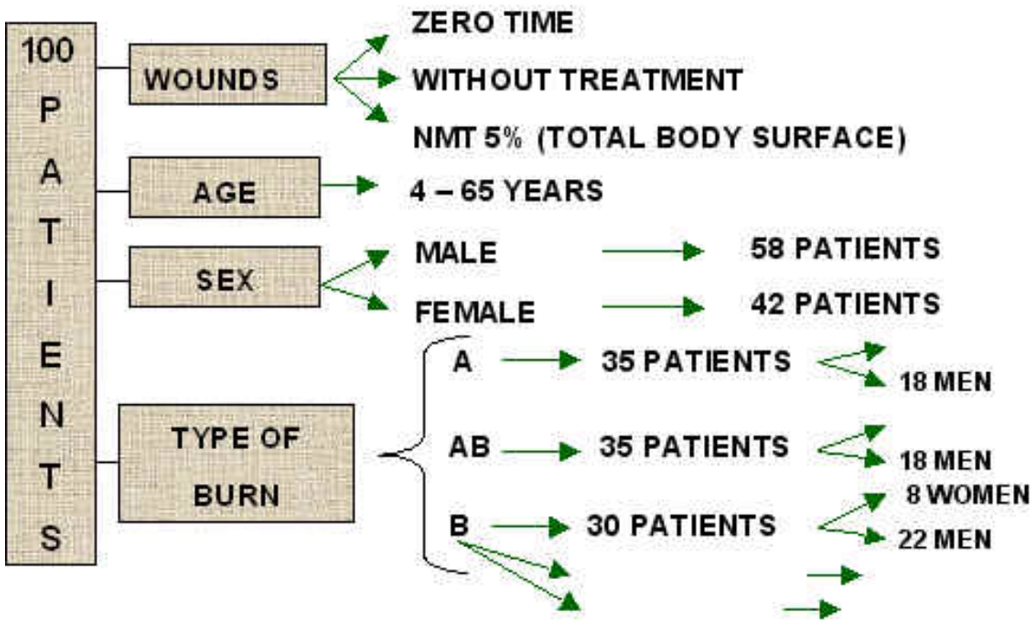
If we compare the usual treatments with the use of collagen membrane, we clearly notice remarkable advantages in the latter treatment, as:
a) it accelerates the epithelization process in "A" and "AB" burns (specially significant in the latter) and in "B" burns after the scarectomy a rapid proliferation of the granulated tissue occurs;
b) the evolution of patients that have not been grafted is similar to that of the conventional treatment;
c) the usual sign-symptomatology was reduced showing an excellent acceptance, with the consequent reduction of cures. Therefore, the patients had a more comfortable and less painful recovery as well as a faster evolution.

## CONCLUSIONS

The outcome of the treatment with collagen membrane was highly successful concerning to the above mentioned items, as well as in burns, and the places from which grafts were taken. Further studies are necessary to evaluate the histopathological scar tissue response.-

**Table I**

| | LOCAL SEPSIS | MEMBRANE CHANGES | | ALLERGY OR INTOLERANCE |
|---|---|---|---|---|
| | | PARTIAL | LOCAL | |
| A | -- | --- | --- | -- |
| AB | 3 | 3 | 9 | -- |
| B | 3 | 4 | 12 | -- |
| DONOR AREA | 1 | 3 | 3 | -- |




**TYPE "A" BURNS**
**AVERAGE: 5,3 DAYS**

| PATIENTS | DAYS |
|---|---|
| 9 | 4 |
| 14 | 5 |
| 5 | 6 |
| 5 | 7 |
| 2 | 8 |

**TYPE "AB" BURNS**
**AVERAGE: 8,8 DAYS**

| PATIENTS | DAYS |
|---|---|
| 14 | 8 |
| 12 | 9 |
| 9 | 10 |

**DONOR AREAS**
**AVERAGE: 6,1 DAYS**

| PATIENTS | DAYS |
|---|---|
| 5 | 5 |
| 9 | 6 |
| 4 | 7 |
| 2 | 8 |

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