

Outcomes of hand burns in severely burnt patients- a review of 27 patients at the Victorian Adult Burns Service.

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Introduction: Hand burns can result in significant functional morbidity and are often the cause of long-term disability for patients. Early debridement, grafting and specialised hand rehabilitation are the cornerstones of good outcomes however in major burns these are often delayed due to systemic considerations. A review of major burns cases seeks to clarify the outcomes of hand function in these patients.

Methods: Patients who sustained burns of greater than 20% TBSA associated with hand burns were identified by searching the VABS database. Chart review was undertaken and those who sustained hand burns not requiring grafting were excluded. Patients were then examined for range of movement of hand joints, grip strength and functional dexterity and the Quick-DASH questionnaire was administered.

Results: 27 patients were identified. Average TBSA was 38%. Subgroup analysis was made to compare those patients who underwent early grafting (< 5days) with those who had a delay to grafting of the hand burns. Rate of secondary reconstruction to the hands was higher in the delayed subgroup (p=0.001). Size of the burns correlated with time to definitive wound closure.

Conclusions: Significant functional morbidity is often associated with burns to the hand in major burns patients. This may be related to delays to definitive grafting of hand burns.

Key Words

Burns Hand Outcomes

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