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PARAFFIN GAUZE VERSUS BISMUTH TRIBROMOPHENATE GAUZE IN SECOND DEGREE BURNS

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Aim: This clinical study, which was done near the hospital of the Italian army camp in Tallil (Iraq), proposes the evaluation of the differences existing between burn patients: treated at a topical level with Bismuth Tribromophenate gauze versus with paraffin gauze.

Methods: Two groups were set up, of 15 patients each, suffering from similar superficial and deep second-degree burns. The etiology of the burns in both groups was made up of 80% of cases of household bomb explosions, 10% of cases from direct flames following a fire of variable range, and the remaining 10% from contact with high temperature liquids.

A group of patients was treated locally with paraffin gauze, and the other group with based Bismuth Tribromophenate gauze on the characteristics and the quantity of exuding.

Results: The patients treated with Bismuth Tribromophenate gauze, including those hospitalized as well as external, showed progressive improvement in the local conditions of the burns with major compliance towards pain with the passing of time. The progressive disappearance of symptoms and predictive signs of local microbial colonization and suffering constituted a common factor in all those belonging to the group treated with Bismuth Tribromophenate gauze.

Vaseline gauze is equally efficient in the production of a moist microenvironment appropriate for healing and equally active in absorbing exuding wounds but exhibits noteworthy limitations in counteracting the signs of microbial colonization in at-risk burns.

Discussion: Bismuth Tribromophenate gauze constitute an optimal product in the treatment of second-degree burns, especially when they are complicated by microbial colonization, incongruous initial treatment and delayed healing.