**Outreach**

Your Outreach Librarian can help facilitate evidence-based practise for all Burns members of staff, as well as assisting with academic study and research. We can help with **literature searching, obtaining journal articles and books**, and setting up individual **current awareness alerts**.

**Literature Searching**

We provide a literature searching service for any library member. For those embarking on their own research it is advisable to book some time with one of the librarians for a 1 to 1 session where we can guide you through the process of creating a well-focused literature research and introduce you to the health databases access via NHS Evidence.

**Critical Appraisal Training**

We also offer **one-to-one or small group training** in literature searching, accessing electronic journals, and critical appraisal/Statistics. These are essential courses that teach how to interpret clinical papers.

**Books**

Books can be searched for using SWIMS our online catalogue at [www.swims.nhs.uk](http://www.swims.nhs.uk). Books and journals that are not available on site or electronically may be requested from other locations. Please email requests to: [thomas.osborne@uhbristol.nhs.uk](mailto:thomas.osborne@uhbristol.nhs.uk)
Contents

1: Tables of Contents from April’s Burns journals

2: New NICE Guidance

3: Latest relevant Systematic Reviews from the Cochrane Library.

4: New activity in Uptodate

5: Quick Exercise

6: Current Awareness database articles
Traditional burn care in sub-Saharan Africa: A long history with wide acceptance
A systematic review of patient reported outcome measures (PROMs) used in child and adolescent burn research
Burn related mortality in Greater Manchester: 11-year review of Regional Coronal Department Data
Mortality and causes of death of Dutch burn patients during the period 2006–2011
The responsiveness of the Chelsea Critical Care Physical Assessment tool in measuring functional recovery in the burns critical care population: An observational study
Tracheostomy in pediatric burn patients
Paediatric post-burn scar management in the UK: A national survey
Comparing outcomes of sheet grafting with 1:1 mesh grafting in patients with thermal burns: A randomized trial
Intentional and non-intentional burn related deaths: A comparative study of socio-demographic profile
Intentional injuries and patient survival of burns: A 10-year retrospective cohort in southern Brazil
Basic investigation into the present burn care system in China: Burn units, doctors, nurses, beds and special treatment equipment
Epidemiology and outcome analysis of scalds in children caused by “guo lian kang”: An 11-year review in a burn center in China
Burns in patients over 90: A fifteen-year series from a regional burns centre
Burns education for non-burn specialist clinicians in Western Australia
Efficacy of a burn-specific cognitive-behavioral group training
Effects of cholecalciferol supplementation and optimized calcium intakes on vitamin D status, muscle strength and bone health: A one-year pilot randomized controlled trial in adults with severe burns
Predisposing factors for candidemia in patients with major burns
The visual analogue thermometer and the graphic numeric rating scale: A comparison of self-report instruments for pain measurement in adults with burns
Influence of body mass index on skin grafting in pediatric burns
A pilot study exploring the relationship between trauma symptoms and appearance concerns following burns
Study of proliferation and 3D epidermal reconstruction from foreskin, auricular and trunk keratinocytes in children
Ten years later – scalp still a primary donor site in children
The activity of silver nanoparticles (Axonnite) on clinical and environmental strains of Acinetobacter spp.
Anti-inflammatory effect of glycyrrhizin on rat thermal injury via inhibition of high-mobility group box 1 protein
Hydrogen-rich saline resuscitation alleviates inflammation induced by severe burn with delayed resuscitation
A case-control study of psychosocial risk and protective factors of self-immolation in Iran
Childhood burns in Sulaimaniyah province, Iraqi Kurdistan: A prospective study of admissions and outpatients
Reconstruction of transhumeral amputation stumps with ipsilateral pedicled latissimus dorsi myocutaneous flap in high voltage electrical burns
Combination of rhomboid flap and double Z-plasty technique for reconstruction of palmar and dorsal web space burn contractures
Aesthetically and functionally satisfying reconstruction of an Achilles tendon and overlying skin defect in a 15 year old girl: A case report
Pulmonary embolism in burns, is there an evidence based prophylactic recommendation? Case report and review of literature
Finger injury from over-exposure to an industrial gamma radiation source
Use of mineral oil Fleet enema for the removal of a large tar burn: A case report
Burns and epilepsy – review and case report
Is Laser Doppler imaging (LDI) a measure of burn depth?
Biobrane for burns of the ear – A novel technique
Can an innocent toy become dangerous? The hydrogen gas balloon burn
A brief summary of long-term treatment modalities for major burn survivors in low and middle-income countries
A survey of skin substitute use in United Kingdom and Australasia

Self-immolation as a proxy measure for unmet needs among the vulnerable
New NICE Guidance

Medical Technologies Advisory Committee members
...anaesthesia and high dependency care for burns, neurosurgery and major trauma. She is currently clinical lead for paediatric burn care at the Bristol Children’s Burn Centre, paediatric lead for the SWUK Burn Network and for the Severn and Peninsula...

Published March 2015

Previous NICE Scholars
...Lawton Extremity Reconstruction Fellow Imperial NHS Foundation Trust, London Read more Graham Lawton is an Army Burns and Plastic Surgery registrar on the Pan Thames rotation and is currently the Extremity Reconstruction Fellow at Imperial College...

Published March 2015

Latest relevant Systematic Reviews from the Cochrane Library

Honey as a topical treatment for wounds
Andrew B Jull, Nicky Cullum, Jo C Dumville, Maggie J Westby, Sohan Deshpande and Natalie Walker
Online Publication Date: March 2015

New activity in Uptodate

No updates this month
Quick Exercise

Have a play with Uptodate. Log in via Athens (if you don’t have an Athens account register using your UHBristol email address here: https://openathens.nice.org.uk/)

Current Awareness database articles

**Title:** Trauma and burns in children

**Author(s):** Ross M.J., McCormack J.G.

**Abstract:** Trauma is the leading cause of death and disability in children, most often resulting from blunt trauma sustained in motor vehicle accidents and falls. An immediate coordinated resuscitation may contribute to improved morbidity and mortality outcomes. A multi-professional approach to the treatment of critically injured children should be adopted; where the primary survey aims to identify and manage immediately life-threatening injuries to airway, breathing and circulation. Following cardiovascular stabilization, the secondary survey serves to structure a detailed examination for other more subtle or less severe injuries. Attention to fluid therapy, analgesia, thermoregulation and glucose homeostasis form important aspects of the secondary survey. Children injured in fires may have suffered from smoke inhalation or sustained burns to the upper airway, with rapid swelling of mucosal tissue, which can make immediate control of the airway very challenging. Both flame burns and scalds can cause significant fluid losses and are associated with a significant risk of mortality. This review discusses the principles of the primary and secondary survey in injured children, fluid resuscitation and outlines the management of children suffering from burns.
Title: Epidemiology of burns in children and adolescents from Chile's metropolitan region [Spanish]
Epidemiología de las quemaduras en niños y adolescentes de Región Metropolitana de Chile

Author(s): Fresia Solis F., Carmina Domic C., Rolando Saavedra O.

Abstract: Objective: To determine demographic, clinical and health care factors associated to prevalence of burns in children less than 20 years of age in the districts of Cerro Navia, Lo Prado and Pudahuel, and their comparison with incidence in 2011. Patients and Method: Population survey based on probability and two-stage stratified complex sample of households, registering 4,968 households. In 302 of them randomly selected, the mother/adult present at the time of the injury took a survey. A questionnaire of 50 questions (20 minutes), created by 6 experts and previously validated, was conducted by 10 interviewers and 3 supervisors. People were contacted by telephone before visiting them at their homes. The non-response rate was 6%, after up to 3 home visits.

Title: Isolated pediatric burn injury in Iraq and Afghanistan

Author(s): Borgman M.A., Matos R.I., Spinella P.C.

Abstract: OBJECTIVES: To characterize the epidemiology of burn injury in pediatric patients and identify factors associated with mortality based on burn severity. DESIGN: Retrospective cohort study. SETTING: U.S. military combat support hospitals and forward surgical hospitals in Iraq and Afghanistan. PATIENTS: Iraqi and Afghan children less than 18 years old admitted with isolated burn injury. INTERVENTIONS: None.

Title: Early paediatric scald surgery—a cost effective dermal preserving surgical protocol for all childhood scalds

Citation: Burns : journal of the International Society for Burn Injuries, June 2014, vol./is. 40/4(777-778), 1879-1409 (01 Jun 2014)

Author(s): Rawlins J.M.

Title: Paediatric burns: From the voice of the child

Citation: Burns, June 2014, vol./is. 40/4(606-615), 0305-4179;1879-1409 (June 2014)

Author(s): McGarry S., Elliott C., McDonald A., Valentine J., Wood F., Girdler S.

Language: English

Abstract: Introduction Despite burns being common in children, research into the psychological experience and trauma remains limited. Improvements in the professional understanding of children's experiences will assist in improving holistic care. Purpose This study uses phenomenology, a qualitative methodology to explore the psychological experiences following a burn injury in children. Methods In-depth interviews were conducted six months after burn with 12 (six girls and six boys) children who underwent surgery for a burn. The children were aged eight to 15 years. The interview examined the overall experience of children and included probing questions exploring participants' perceptions, thoughts and feelings. Transcripts were analysed according to the seven-step Coliazz method. Relationships between themes were explored to identify core concepts.

Title: Predictors of re-epithelialization in pediatric burn

Author(s): Brown N.J., Kimble R.M., Gramotnev G., Rodger S., Cuttle L.

Abstract: Introduction An important treatment goal for burn wounds is to promote early wound closure. This study identifies factors associated with delayed re-epithelialization following pediatric burn. Methods Data were collected from August 2011 to August 2012, at a pediatric tertiary burn center. A total of 106 burn wounds were analyzed from 77 participants aged 4-12 years. Percentage of wound re-epithelialization at each dressing change was calculated using Vistitrak. Mixed effect regression analysis was performed to identify the demographic factors, wound and clinical characteristics associated with delayed re-epithelialization.
Toxic shock syndrome surveillance in UK children

Author(s): Adalat S., Dawson T., Hackett S.J., Clark J.E.

Abstract: Background Toxic shock syndrome (TSS) is an acute toxin-mediated illness caused by toxin-producing strains of Staphylococcus aureus and Streptococcus pyogenes. There is no recent data regarding incidence, management and mortality of TSS in UK children. Methods Consultants from paediatric and burns units in the UK and Ireland, reported cases of TSS seen between November 2008 and December 2009, via the British Paediatric Surveillance Unit. Respondents were sent questionnaires requesting detailed information about TSS cases. Established criteria were used to divide cases into staphylococcal or streptococcal TSS.

Paulinchen’s roll. Optimized compression therapy at the neck after paediatric burns and scalds [German]

Die Paulinchenrolle: Optimierung der Kompressionstherapie am Hals nach kindlichen Verbrennungen und Verbrühungen

Author(s): Meyer T., Germer C.-T.

Abstract: Burns and scalds are among the most common traumas in childhood and more often than not lead to hypertrophic scarring. Compression therapy is one of the main concepts in the prophylaxis and therapy of hypertrophic scars. However, the mode of action and the optimal pressure are still unknown. The pressure under the compression garments was measured with the Kikuhime-Subbandage & Body Pressure Measuring Device. Patient’s age or sex did not make any significant difference. Mean detected pressure was 25.7 mmHg. The throat is one of the problematic areas. It needs 19 mmHg pressure and is often involved in scale injuries in children. An improvement of compression therapy in this area can be reached by the Paulinchen’s roll, which was developed by Krenzer-Scheidemantel. Compression garments for the therapy of hypertrophic scars must be individually fitted in order to guarantee a sufficient pressure of an average 26 mmHg. Using the Paulinchen’s roll a sufficient pressure of compression can be reached easily in children and adolescents - even in the problematic area of the throat.

Obesity and outcomes following burns in the pediatric population

Author(s): Ross E., Burris A., Murphy J.T.

Abstract: Purpose While obesity is associated with increased mortality and decreased functional outcomes in adult burn patients, the ramifications of larger than average body size in the pediatric burn population are less well understood. The present study examines whether obesity was associated with poor outcomes following pediatric burn injuries. Methods Thermal injury data for patients < 18 years of age admitted to a Level III burn center over ten years (n = 536) was analyzed. Obesity was defined as > 95th percentile of weight for height according to the WHO growth charts (< 2 years of age) or BMI for age according to the CDC growth charts (2-18 years of age). Outcomes were compared between thermally injured obese (n = 154) and non-obese (n = 382) children. All data was collected in accordance with IRB regulations.

An hypnotic suggestion: review of hypnosis for clinical emergency care

Author(s): Iserson K.V.

Abstract: BACKGROUND: Hypnosis has been used in medicine for nearly 250 years. Yet, emergency clinicians rarely use it in emergency departments or prehospital settings.OBJECTIVE: This review describes hypnosis, its historical use in medicine, several neurophysiologic studies of the procedure, its uses and potential uses in emergency care, and a simple technique for inducing hypnosis. It also discusses reasons why the technique has not been widely adopted, and suggests methods of increasing its use in emergency care, including some potential research areas.

Predictors of re-epithelialization in pediatric burn
Objective: To survey the curative effects of kinesitherapy in combination with self-made simple orthosis in treatment of scar contracture of burned hand in children. Methods: Fifty-eight children with burns of unilateral hand and received treatment in our rehabilitation center from January 2012 to January 2014 were divided into common rehabilitation (CR) and SO groups according to the random number table, with 29 cases in each group. After the wounds were healed, patients in group CR were treated with kinesitherapy combined with hand game exercises and pressure gloves, while patients in group SO were treated with kinesitherapy combined with hand game exercises and self-made SO, which was composed of finger web adhesive bandage, self-adhesive bandage, and infusion set fixing plate. Before treatment and 16 weeks after treatment, scar condition was assessed with the Vancouver Scar Scale (VSS); hand function was evaluated by the Jebsen Test of Hand Function, and the completion time was recorded; and the improvement score was calculated using Visitrak. Mixed effect regression analysis was performed to identify the demographic factors, wound and clinical characteristics associated with delayed re-epithelialization.
1.6) points. There was a significant difference in improvement score of ADL between the two groups (t =2.246, P =0.029). Conclusions: Kinesitherapy in combination with self-made SO can improve the functional recovery of burned hand in children and prevent contractures in hand, and it is worth applying generally.

**Title:** Acute pain management in burn patients: Appraisal and thematic analysis of four clinical guidelines

**Author(s):** Gamst-Jensen H., Vedel P.N., Lindberg-Larsen V.O., Egerod I.

**Abstract:** Objective: Burn patients suffer excruciating pain due to their injuries and procedures related to surgery, wound care, and mobilization. Acute Stress Disorder, Post-Traumatic Stress Disorder, chronic pain and depression are highly prevalent among survivors of severe burns. Evidence-based pain management addresses and alleviates these complications. The aim of our study was to compare clinical guidelines for pain management in burn patients in selected European and non-European countries. We included pediatric guidelines due to the high rate of children in burn units.

**Title:** Epidemiology of bedside stove burns in a retrospective cohort of 5089 pediatric patients


**Abstract:** Objective: To retrospectively analyze the epidemiological characteristics of pediatric bedside stove burns (PBSB) in China and to explore prevention and control measures. Methods: Data on pediatric burns from three hospitals located in the epidemic area were collected from January 1996 to December 2010 and were divided into the PBSB group and the control group. The epidemiological characteristics and related information for each patient were analyzed.

**Title:** Demographic characteristics and prognostic indicators of childhood burn in a developing country

**Author(s):** Olawoye O.A., Iyun A.O., Ademola S.A., Michael A.I., Oluwatosin O.M.

**Abstract:** Children constitute a significant proportion of burn victims in most studies from the developing countries. While there has been a progressive improvement in the outcome from childhood burn in many developed nations, the morbidity and mortality remains high in many low and middle income countries. The aim of our study is to evaluate the demographic characteristics and prognostic indicators of childhood burn in a major referral teaching hospital in a developing country. A review of the records of 638 patients with acute burns managed over a 10-year period from January 2001 to December 2010 at the University College Hospital, Ibadan Nigeria was done. The clinical and epidemiological data were retrieved from computerized data base using the ISBI proforma. Information obtained includes Biodata, Etiology, location, TBSA, presence of Inhalation injury and the treatment outcome. Data of patients aged 16 years and below were analyzed using the SPSS version 16. The main outcome measure was the patient's survival. 289 children representing 45.3% of the total number of burn patients were managed over the period. The M:F ratio was 1.1:1. The median age of the cohort was 4.0 years while the median TBSA was 21.0%. Non-intentional causes were responsible for 89.6% cases. Most of the injuries (88.6%) occurred at home. Eighty-three patients had inhalation injury out of which 57 (68.7%) deaths were recorded. The overall mortality rate in the cohort was 39.5% with an LA50 of burn size of 45%. The TBSA was also found to be a determinant of outcome. Majority of childhood burns are from preventable causes with attendant dismal mortality figures. Effective burn prevention strategies and improved quality of care remain pivotal in reducing childhood burn morbidity and mortality in the developing countries.

**Title:** Paulinchen’s roll. Optimized compression therapy at the neck after paediatric burns and scalds [German]

**Author(s):** Meyer T., Germer C.-T.

**Abstract:** Burns and scalds are among the most common trauma in childhood and more often than not lead to hypertrophic scarring. Compression therapy is one of the main concepts in the prophylaxis and therapy of
hypertrophic scars. However, the mode of action and the optimal pressure are still unknown. The pressure under the compression garments was measured with the Kikuhime-Subbandage & Body Pressure Measuring Device. Patient’s age or sex did not make any significant difference. Mean detected pressure was 25.7 mmHg. The throat is one of the problematic areas. It needs 19 mmHg pressure and is often involved in scale injuries in children. An improvement of compression therapy in this area can be reached by the Paulinchen's roll, which was developed by Krenzer-Scheidemantel. Compression garments for the therapy of hypertrophic scars must be individually fitted in order to guarantee a sufficient pressure of an average 26 mmHg. Using the Paulinchen’s roll a sufficient pressure of compression can be reached easily in children and adolescents - even in the problematic area of the throat.
Library Opening Times

Staffed times 8.00 am—17.00 pm
Monday to Friday

Swipe Access 7.00 am—23.00pm
7 days a week

Level 5,
Education Centre
University Hospitals Bristol

Contact your outreach librarian @
Thomas.Osborne@UHBristol.nhs.uk