CONCLUSION
In the present study we studied 112 patients. Out of which 34 patients were included in control group in which PVP-Neosporin powder application were studied. 78 patients were included in test group in addition to above multiple subescharal injections of PVP solution i.e. PVP + Neosporin + PVP subescharal injection was used. From the present study conclusions drawn are as follows:

1. Most of burn were thermal in nature.
2. Maximum burn injury occurred in low socio-economic group in rural area and middle socio-economic class in urban area.
3. In case of burn injury involving males during outdoor activity.
4. In females burn injury taken place during indoor activities.
5. Maximum incidence of burn injury was in age group of 20-30 years.
6. No allergic reactions were observed in topical application or injection of Povidone-Iodine.
7. In PVP-Neosporin treated patients the scar were yellowing tinged hyperpigmented and fibrous.
8. Deep burn involving smaller area healed without scar.
9. Post burn contracture were observed in 8 cases of test group and 7 cases in control group.
10. No patient was reported with features of hypo/hyperthyroidism.
Effect of subescharal injection of PVP-Iodine

1. Escharoclysis was faster in subescharal PVP-I injection treated patients.

2. Subescharal injected patients showed that there was less infection in subescharal plane as compared to the control group.

3. Healthy granulation surface was seen after separation of eschar.

4. Graft acceptance in subescharally treated patients was high in comparison to patients without it.

5. The chances of systemic sepsicaemia is less in cases of test group.

6. Subescharal injection causes slight pain to patient but neither a sedative nor analgesic is required in this procedure.

The conclusions drawn that in deep burn patients by using subescharal injection of PVP-Iodine is markedly superior as shown by minimal infection rate and decreased escharoclysis time in comparison to control group.

This is because of wide spectrum of action increased concentration of antimicrobial in subescharal plane.