CONCLUSIONS
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The comparative effects of PVP + N, SSD and amniotic membrane application were studied and compared in 75 burn patients. Out of which 47 patients were of superficial burn and 28 patients were of deep burn. Conclusions drawn are as follows -

1. Females are more affected in the age group of 15-35 years.

2. Most burn accidents involving, females were either suicidal or homicidal. Majority of these burns were thermal in nature and occurred in rural area.

3. Patients with major burn came directly to medical college hospitals much earlier than those with minor burns who reached the surgical OPD only when the burn became grossly contaminated.

4. Superficial and deep burn involving smaller areas healed without scar.

5. No allergic reaction was observed in application of Povidone Iodine with Neosporin powder application while allergic reaction was noticed in one patient when Silver Sulfadiazine was applied.
6. Contractures were observed in 6 cases when Povidone Iodine with Neosporin powder was applied and 3 cases when Silver Sulfadiazine ointment was applied.

7. The scars were whitish flat in SSD ointment treated cases and yellowish tinged hyperpigmented and more fibrous in Povidone Iodine with Neosporin powder application and scars of completely healed areas were hypopigmented in amniotic membrane application.

On comparing the effect of two dressings to assess the superiority of either of them, following conclusions were drawn:

1. Only amniotic membrane requires storage in sterile container with saline dilution of 1:40 at 4°C with addition of 1 gm of Kenamycin sulphate or 10 Lakhs units of crystalline penecilline or 1 gm streptomycin sulphate etc., while Silver Sulfadiazine ointment and Povidone Iodine with Neosporine powder requires no specific storage facility.

2. Daily changing of dressing with SSD causes pain to the patient while PVP + N used in superficial and deep burns caused minimal pain since daily dressings were not required hence, irritation of exposed nerve endings was avoided as in closed dressings. Application of amniotic membrane also causes no pain to the patient except during cleaning.
3. The healing is faster in Povidone Iodine with Neosporin powder treated cases than was with Silver Sulfadiazine ointment and amniotic membrane.

4. Silver Sulfadiazine and amniotic membrane gave good results with superficial and smaller areas of burn. On the other hand, Povidone Iodine & Neosporin gave good results in all types of superficial, deep and neglected cases of burn. Povidone lotion injection diluted in saline injected in the subescharal plane gave very good result in controlling infection and early escharolysis followed by early graft take up and subsequent healing and also reduces the chance of septicaemia.

In brief, the conclusion may be drawn that treating superficial and deep burn patients by using Povidone Iodine lotion + Neosporin powder (N) is markedly superior to other known methods as shown by the minimal infection rate and markedly reduced healing time. This is basically because of wide spectrum of action, tanning effect of PVP and attainment of a dry burn surface.

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