

Hand Burns

What do we need to know?

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Outcomes

- Partial thickness – universally good

Sheridan RL, J Trauma Inf & Crit Care 1995;38:406-11

- Full thickness – mostly good

Johnson C, Engrav LR, JBCR 1980;1:19-21

- Deep full – universally poor

Sheridan RL, J Trauma Inf & Crit Care 1995;38:406-11

Salsisbury RE, Hand Clinics 1986;2:25-32

Deformities

Web space contractures

Dorsal skin contractures

Extensor tendon
adhesions

MP joint extension

PIP flexion deformity

5th digit abduction

Boutinierre

Swan neck

Mallet

Amputation

Neuropathy

Amputation

“Hand function is a strong
predictor of quality of life after
burn injury”

Anzurant A, Plastic Reconst Surg
2005;116:791-7

Patients say they have the most problems with:

Activities of Daily Living

writing

picking up coins

turning a key

holding a glass or pain

Work

Questions

Wound closure – When and how?

How do we protect the extensor mechanism?

What therapy protocol is best?

How do we measure outcome?

Can we agree on an approach so patients can be randomized?

How do we analyze the large volume of data per subject? (60 ROM measurements alone)