

# Non Thermal injuries, Burn Reconstruction Principles

## Types of non Thermal Injuries

- 1. Electrical injuries
- 2. Chemical injuries
- 3. Cold Injuries
- 4. Ionizing radiation injuries



### Electrical injuries



#### **PATHOPHYSIOLOGY**

- Joule Effect:
- Passage of current through a solid conductor results in conversion of electrical energy to heat
- Ohm's Law:
- I = V / R
- Intensity of the current (amperage) is directly proportional to the potential flow (voltage) and inversely proportional to the resistance

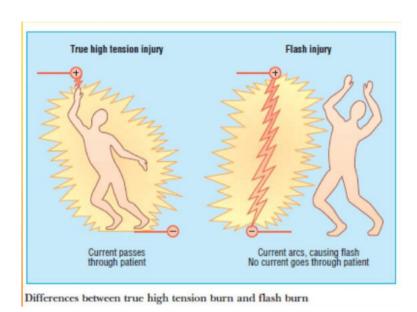


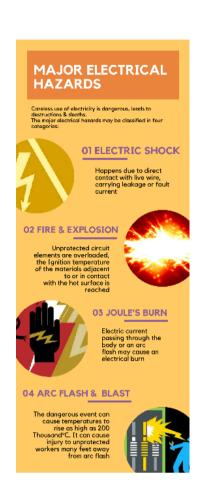
- Joule's Law:
- $J = 0.24 \times I \text{ sq} \times R \times T$
- J = Heat Production I = Current R = Resistance T = Time
- Resistance of body tissues
- Nerves and Blood Vessels Good to excellent conduction
- Muscle Bone and Skin Resistant to passage of electricity Electrical Burns
- Extent of injury depends on
- Type of current (alternating vs direct)
- Pathway of flow
- Local tissue resistance
- Duration of contact Electrical Burns

### Mortality of electrical burns

- •
- Low-voltage injuries:
- Alter the cardiac cycle
- High-voltage injuries
- Cause concomitant tissue damage
- Survival of contact with voltage greater than 70,000 volts uncommon







## What is Arc Flash/Blast?

#### ARC FLASH

- Radiant Heat Horrific burns, Fires
  - > can be fatal (3m)
  - > arc jets 20,000oC,
  - > plasma boundary 5000oC
- Light UV burns/blinding
- Noise > 160dB ruptures eardrum
- Molten Metal (copper) >1080oC
- Toxic Gas PVC (HCI, CO)/ metal oxides

#### ARC BLAST

Rapid expansion of air, vaporisation of copper conductors. 67,000 times metal to gas

- Pressure wave >1400kg/m2
  - breaks bones, collapses lung
  - destruction of assets
- Projectiles >1600km/hr





#### **CLASSIFICATION**

- | Physical
- 1.Heat
- 2. Electrical Burn injuries
- 3. Lightening injuries
- 4. Radiation burns
- 5. Friction burns
- II Chemical
- Acids --1.Sulphuric acid
  - 2. Hydrochloric acid
  - 3. Nitric acid
  - 4.hydrofluoric acid
  - 5.Chromic acid

#### Classification—contd.

- Alkalies 1.Caustic soda
  - 2. Caustic potash
  - 3.Lime
  - 4. ammonia
- Organics 1. Phenol
  - 2. Lysol
  - 3.Cresol
- Inorganic -- 1. Phosphorus
  - 2. Sodium
  - 3. Magnesium

#### **III Other special burns**

- 1. Hot coal tar burns
- 2. Jaggery burns
- 3. Molten metal burns
- 4.Hot oil burns



#### CHEMICAL BURNS

- Apart from damaging skin chemical toxins may get absorbed through skin and go into circulation in chemical burns. Toxic effects on patients are in
- 1. liver—acute liver atrophy
- 2. renal—renal failure
- nervous –delerium and convulsions
   Carbolic acid (Phenol), Creselic acid (cresol),
   Chromic acid and Hydrofluoric acid are known to cause systemic toxicity

















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### Management of chemical burns

- 1. Wounds to be washed with running water minimum for 15 min or till litmus test becomes negative.
- 2. Proper care of eyes in facial burns with ophthalmic reference
- 3. Early excision and skin grafting.















Surgical



Surgical Management













### Special Chemical Burns

- Hydrofluoric acid burns—HF acid is used in glass industry. Patient presents with severe intense pain at the site of burn. Treatment in these burns is Ca Gluconate irrigation or local injection.
- Phenol burns--- are known for its systemic manifestations. Treatment is irrigation with copious water and removal of phenol.



# Hydrofluoric acid burns









### Tar burns



## Car battery acid burns







# Burns of special sites

- 1.Burns of face –eye, ear
- 2.Burns of hand



#### FACIAL BURNS

- Eye burns –
- inability to close the lids
- exposure keratitis with damage to cornea.
- managed either with tarsorraphy or early excision and skin grafting





#### Ear burns –

- Ear cartilage is peculiar in nature –
- 1. is a single cartilage
- 2. perichondrium is tightly adherent with skin on both the sides
- Burns of ear if not properly treated may lead to chondritis and crumpled ear deformity.
- Treatment includes –
- 1. closed dressing with antibacterial cream
- 2. pillows to be avoided to prevent frequent rub and subsequent infection
- 3.excision and temporoparietal fascial cover in full thickness burns of ear.









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### Summary of tt. For specific chemical burns

- Irrigation with water-all except sodium, lithium, potassium metals and mustard gas
- Calcium salt inj. Or irrigation -hydrofluoric acid
- cover with oil Na, K ,LITH. Etc.
- cover with water –phosphorous metal

#### Radiation burns





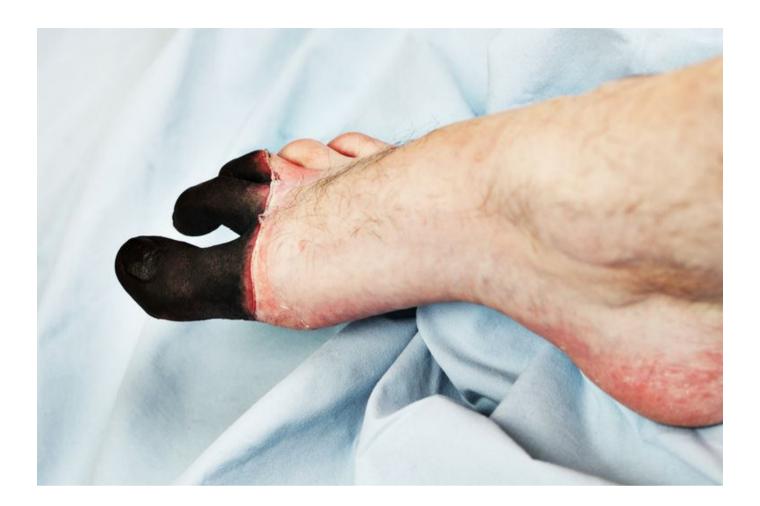
### Management

- Aloe vera cream
- Corticosteroid creams
- Systemic Amifostine

### Cold injuries



#### Frost bite



- Rewarming of the skin
- Debridement and pain medication
- Whirl pool therapy
- Anticoagulants and antibiotics
- Surgery
- Hyperbaric oxygen



### Trench foot



Below freezing
Temperature
+ moisture

### Management

- Rest, warming
- Picric acid, Boric acid
- Alcohol