

Poster Presentation  
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**Use of a Unique Hydrogel\* in Pediatric Surgical Practice**

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Currently, there is no ideal effective topical material for the full course of wound healing. In the therapy of deep burns there are very important selected topical agents available. Approximately 2 years ago, we began using a new hydrogel, *Elasto-Gel™* Occlusive Wound Dressing (*EG*), according to the instructions provided. After the first evaluations with very positive results, we expanded the applications to a wide variety of wounds.

Our results show that the main therapeutical advantages of *Elasto-Gel™* dressings are:

- a) The appearance of the final wound healing, and
- b) The control of infections.

Other recommended applications are:

- 1. Cleaning the necrotic tissue and infected surface,
- 2. Treatment of and as a temporary covering of deep partial thickness and full thickness burns,
- 3. Treatment of wounds after necrectomy and escharectomy,
- 4. Biotic transforming treatment of torpid granulation surface,
- 5. Preparation of the wound before skin grafting,
- 6. Prevention and treatment of hypertrophic scars.

**Case Reports**

Seventy-four (74) children with many types of wounds were treated with *EG* between September, 1991 and December, 1994. The age range was 6 months to 19 years old: mean age, 4; boy/girl ratio - 2:1.

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**\**Elasto-Gel™* Occlusive Wound Dressing**

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**Types of Wounds**

### Traumatic Wounds – 13 Cases

1. **EG** served only as a covering in 6 cases.
2. **EG** used for biotic transforming of the torpid wounds in 4 cases.
3. **EG** was used for cleaning the infected wounds in 3 cases.

### Burn Wounds - 28 Cases

1. **EG** used a temporary covering for deep burns in 4 cases.
2. **EG** used for covering superficial burns in 6 cases.
3. **EG** used for preparing the wounds for autografting after necrectomy in 13 cases.
4. **EG** used for treating torpid wounds in 5 cases.

### Treatment of Pathologic Scars - 33 Cases

1. **EG** was used for prevention of scars in 7 cases.
2. **EG** was used for treatment of hypertrophic scars after operations and mechanical skin damage in 9 cases.
3. **EG** was used for treatment after healing of burns in 17 cases.
4. **EG** has been used under the pressure garments as additional therapy in 5 cases.

## **Results**

The use of **Elasto-Gel™** was very effective in the different stages of wound healing in all the cases studied. The prolongation of the epidermization was observed in only one case, but in this case it did not develop hypertrophic scarring. The product was a very effective dressing for the covering of superficial burns because of the effective pain control and the ease of dressing changes. It was also a very desirable dressing because of the effective elimination of infection. A somewhat surprising result was the reviving of torpid tissue, which leads to a more successful grafting or wound closure. **EG** was also very effective in the treatment of hypertrophic scars. Of the 26 cases which were treated, 21 scars were totally reduced and did not reform after 1 year. **EG** gave additional comfort as well as scar reduction for those patients, who wore the pressure suits in 5 cases.

Overall **EG** is a wound dressing with a wide range of applications and exhibits properties of stimulation of growth on torpid tissue. It reduces pain for most patients and reduces hypertrophic scars. In our experience it has served as an excellent temporary cover for deep burns.