

Other therapies for Managing scars

Silicone application

Your occupational therapist may recommend that silicone is applied to the scar in the form of a gel or a silicone sheet. There is some evidence that silicone may reduce the thickness and improve the appearance of raised scars¹. Silicone should never be used on broken or unhealed skin. Your therapist will give you specific instructions based on the form of silicone you are using. If a reaction to silicone occurs, remove the silicone, wash the skin and contact your therapist to inform them.

Pressure therapy

You may be measured for a custom made pressure garment, which will provide constant pressure to the scar day and night. Full instructions will be given on the wear and care of the garment.

Sun protection

It is essential to protect any scar from the sun. Use a good quality sun-cream with minimum SPF of 50 at all times. Pressure garments or silicone do not protect from the sun. All-in-one suits with an SPF factor can be the easiest way to cover the area at the beach or whilst out in the sun.

Remember: Ask your Occupational Therapist if you are unsure about anything about your child's care.

Additional instructions

OT Name/Contact details

References:

1. (O'Brien L, Jones DL (2013) Cochranedatabase of systematic reviews)



Children's Health Ireland

Scar Management



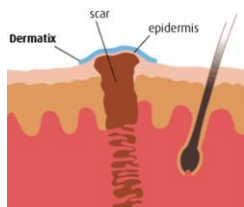
Occupational Therapy Department



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What is a scar?

Scars form as are part of normal wound healing. When the skin's surface is injured, scar tissue forms to close the wound. Scar tissue can take two years or longer to mature (i.e. flatten and pale in colour).



You may be referred to an OT to manage scar tissue after a:

- Burn or scald
- Laceration/surgical incision
- Skin graft

Scars can sometimes become problematic; particularly if a wound took a long time to heal (3 weeks or more), or if your skin tone is darker. Scars can become itchy, cause pain/discomfort or restrict movement across a joint.

Problem scars may be:

- **Hypertrophic:** Remain within the original parameter.
- **Keloid:** expand outside the margins of the original wound).

What treatments are available for scars?

Massage and Moisturising

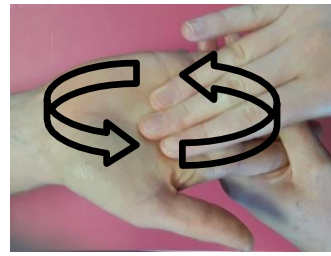
Once scar tissue has healed completely, i.e. there are no open areas and all scabs have fallen off, gentle moisturising can start. Moisturising regularly during the day keeps the scar soft and supple and offers relief from itching. Use a gentle moisturiser which is non-coloured and non-perfumed such as E45 or Aveeno. Always moisturize after bathing as the skin can tend to feel quite dry and tight.

Regular and routine massage of the scar is essential to help break down the scar tissue which is forming. It will also help as sensation returns to the skin. Massage should be completed with moisturising.

Tips for scar massage:

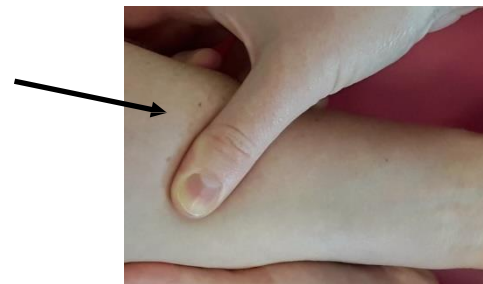
-Massage fragile skin or skin that has only just healed gently.

-Once the skin is able (after 1-2 weeks), you can commence firm scar massage. Your occupational therapist will advise on when to start firm scar massage.



-Massage in small circular motions.

-Massage firmly— your nail-bed should turn white at the top when you are applying enough pressure



-Put the skin under some tension if possible e.g. on the arm, pull back the skin behind the arm so that the scar tissue is under tension while you massage the scar site.



-Use long linear strokes if your scar tissue crosses a joint on the side that it bends e.g. on the palm side of your finger. The aim is to stretch out the joint and stop scar tissue from restricting movement.

