

'Burns: The Evolving Wound'

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Introduction

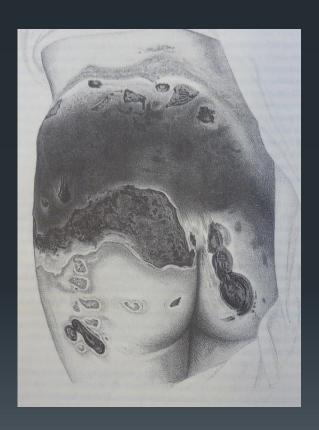
- History of burns, 1800-2000
- British identity
- Professional and patient
- Distinct wound
- Concept of burn changed
- 'Multidisciplinary nature'; team approach unique
- Birth of the clinical team





Topical treatment

- Focus on treating surface
- Few accidents greater variety of treatments
- Treatments compared
 - 'serious aquosities'; treatment
- Carron oil (1759); AgNO3
- Dressings; tight vs loose
- Dermatologist and surgeon



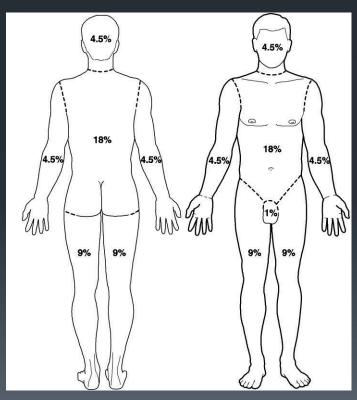
Burns: more than skin deep

- Evolving wound; all systems respond; 'know burns...'
- T. B. Curling (1842); ulcers
- Effect on nerves; depth
- Respiratory tract; pneumonia
- 'silent flooding in' (1920s)
- Drown in fluids; 'take blood'
- Blood replacement WWII



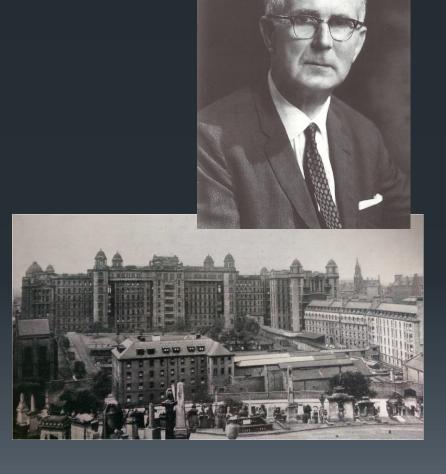
The wound that poisons

- Release of toxic substances
- 'toxaemia'; toxic shock
- Tannic acid (Davidson)
 - Simple; one step treatment
- Bound toxins; retain fluid
- More general shift of fluids
- F. Underhill; circulatory shock
- BSA calculating fluids
- Mortality postponed



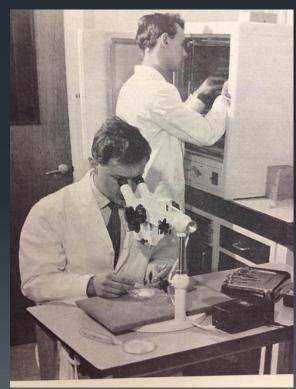
Infected wounds

- Burns patient as danger; transformed into vulnerable
- Glasgow RI; central pivot
- Haemolytic streptococci
- Microbe in air; perfect medium
- Prontosil (1935)
- BAH (1944); infection 5%
- End of odors



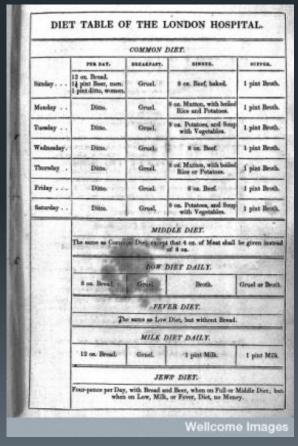
Excising the wound

- Eschar does not inhibit fluid loss; generates infection
- Bacteriological work
- Halt riot by removing burn
- Mechanical debridement
- Skin grafting; 'peel to heal'
- Created a new wound



Starve to death, or feed a burn

- Metabolism accelerates wildly; patients starved
- 'thin diet' Kentish (1797)
- Extra diets (1871)
- '...raging machine'
- Body consumes itself
- Dumps waste (1934)
- 10% BM; impairs immunity
- 30% healing halts



Full recovery

- Physiotherapy; limits
 - Splints; contractures
- Disability; disfigurement
- Psychiatrists; social workers
- Two injuries; one physical
- Team spirit; Guinea Pig Club
- Most 'sent on leave'
- Stigma; patient groups (1970s)





Conclusions

- Focus on the burn wound
- Evolving wound
- Topical to psychological
- '...takes a team to treat a burn'; expensive
- Mortality decline
- Scars: the new focus



