USE OF SUPRATHEL® IN TWO PAEDIATRIC PATIENTS WITH TOXIC EPIDERMAL NECROLYSIS (TEN).

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Toxic epidermal necrolysis (TEN) is a severe cutaneous reaction carrying significant risks of morbidity and mortality. There are three stages of classification of the disease, with Stevens Johnson Syndrome (SJS) on one end and TEN on the other end of the spectrum. SJS includes cases with mucosal erosions and widespread purpuric macules with epidermal detachment up to 10% of total body surface area (TBSA); transitional SJS – TEN represents epidermal detachment between 10% and 30% and TEN shows skin detachment of more than 30% of TBSA.

We report the cases of two children, a three months old baby and a seven year old girl, both with a history of viral infection, who presented with rapidly expanding erythematous and vesiculo-bullous skin eruptions and epidermal detachment. The girls were transferred to our children’s burns unit, where fluid and electrolyte therapy was carried out according to our standard resuscitation protocol for burns, and Suprathel® (PolyMedics Innovations GmbH, Filderstadt, Germany) and fatty-gauze as topical wound dressings were applied in form of a whole body cover.

CONCLUSION
- In our cases Suprathel® has been successfully used for the first time in a baby and a young girl with excessive dermal detachment by TEN.
- The wound re-epithelisation was accelerated compared to data in literature;
- The elastic-plastic properties of Suprathel® facilitated easy application on all surfaces.
- Only a single wound covering was required with no need for dressing changes and therefore reduced wound pain.
- The bulky dressing covering the whole body, made the handling and the maintenance of asepsis, especially for the nurses, very easy and also prevented fluid and heat loss through the wounds.