

**BURN FELLOWSHIP AT INTERBURNS TRAINING CENTRE INDIA-  
CHOITRAM HOSPITAL AND RESEARCH CENTRE, INDORE**

**DATES: 29<sup>TH</sup> SEPTEMBER TO 24<sup>TH</sup> OCTOBER 2014 DURATION: 4 WEEKS**

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SURGERY STUDENT (MMED PRS) YEAR 1**

## BURN FELLOWSHIP REPORT



My name is Katusabe Josephine Linda , a first year resident student pursuing masters degree in plastic and reconstructive surgery at Mbarara university of science and technology (CORSU Hospital campus) in Uganda. There is no acute burn care unit at our training campus. Therefore as part of my residency training, I was posted to the interburns training Centre in India to learn and gain experience in the management of acute burns and the burn patient as a whole. The trip was fully sponsored by Interface Uganda.

The Burn unit located at Choitram Hospital and Research Centre in Indore city is a 6 bed unit but is under renovation to accommodate 20 beds. There is a ventilator machine at the unit so the patients who require mechanical ventilation can be managed at the unit but it has access to both adult and paediatric ICU. There is a Skin bank that not only supplies the unit but also nearby hospitals on request at a fairly affordable price.

The burn unit team comprises a multidisciplinary team with a specialist burn surgeon, 2 plastic surgeons, 8 special trained nurses, 7 nursing assistants, a physiotherapist, occupational therapist, dietician, psychologist, 2 surgery resident students and a number of support staff.

My schedule included Daily ward rounds with team at 8:30am and 7:30pm, participation in the admission and management of new cases as they came in directly to the unit, review of outpatients with specialist surgeons, participating in burn operations in theatre as per case availability, interacting with the physiotherapist, occupational therapist, dietician and psychologist to understand their role in burn treatment. When feasible, the afternoon was used for study and research.

During my stay, there were 11 admissions of acute burns including kerosene Flame burns, electrical burns, inhalation injuries, pediatric scald burns, friction burns and toxic epidermal necrolysis. There were a number of non accidental and suicidal burns especially in distraught married women and some as a result of domestic violence.

Working together with the experienced and specially trained team of the Choitram Hospital Burn Unit, headed by Dr. Shobha Chamania, a specialist burn surgeon, I have been able to witness firsthand a **total and comprehensive burn care** for the burn patients.

- This included Emergency management and fluid resuscitation of the patient during the 1<sup>st</sup> 24hrs, next 24hrs and the following in-patient days;
- Adequate pain management for both background and procedural pain during dressing changes and physical therapy sessions. Intravenous and oral cocktails of ketamine ,midazolam, tramadol or paracetamol were used.

- Early surgical excision and grafting of the burn wound which reduces burn related hypermetabolic demands, burn infection, hospital stay and costs giving quicker recovery.
- Use of various effective yet not so costly dressing materials including flamazine, collagen, ceptigras, quirion (ionic silver solution) and opty gauze. I found banana leaf dressing, and limited access dressing simple,very innovative and quite applicable in Uganda.
- The Setup of the skin bank, preparation and use of homograft.
- Provision of well calculated and balanced nutritional requirements with early enteral feeding; using affordable and easily available regular foods
- Early mobilization and physiotherapy; proper positioning and splinting to prevent development contractures. The soft neck collar made out of newspapers or napkins, absorbent cotton and gauze sheets did make a difference in preventing neck postburn contractures.
- Provision of comfort care for major burns unlikely to survive.
- Psychological assessment and counseling of both patients and their attendants to help them cope with the injury and circumstances surrounding the injury especially in cases of suicidal and homicidal attempts as well as terminal burn patients.
- Timely discharge of burn patient with clear instructions, regular outpatient follow up, physical and occupational therapy.
- Burn scar management including massage, use of pressure garments, and silicone sheets. These reduced the occurrence of hypertrophic scars which is one of the challenges in managing our patients.
- Reconstructive surgeries for post burn contractures.

The unit not only provides a total and comprehensive burn care but also treatment that is relatively affordable even to the low income population. This I find relates well and is applicable to the majorly low income population of patients that I will attend to in my country.

I was also able to do a small project looking at the management of airway in inhalation injury among the burn patients which further increased my knowledge base.



Images of some cases seen during my stay



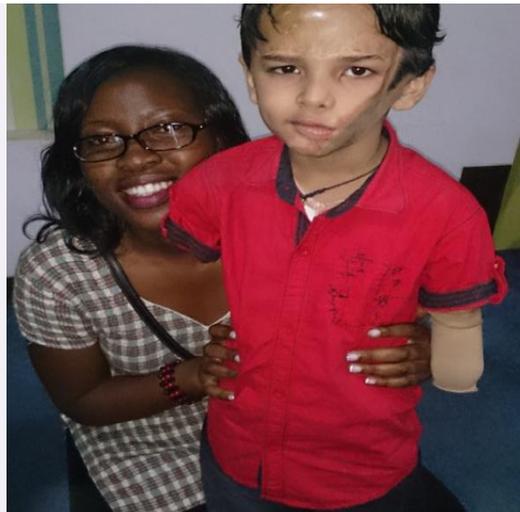
Interacting with team in one of the case presentations



Counseling session for family members of burn patient with Dr. Shobha.

I was also fortunate to attend this year's burn survivors meeting organized by Choitram Hospital Burn Unit where I got to see the smiling and hopeful faces of clients that had once been burn patients but have since been integrated back into the community. The meeting enables them to share survival stories and their challenges with others who have been through a similar experience and as a way feel less isolated plus it motivates them to work for better.

#### IMAGES FROM THE BURN SURVIVORS MEETING





On the eve of my departure was the Diwali festival of light. I was able to share in this rich and colorful Indian tradition.

The main challenge faced was language barrier but even the smiles and nonverbal communications did make a lot of pleasant difference. I did learn some Hindu words too.

Overall, Dr. Shobha and the whole team have been very supportive. Every moment spent working with this hardworking team was very educative yet still enjoyable. I am more knowledgeable and definitely will be a better surgeon because of this experience and fellowship. Great thanks to the burn unit team of choitram hospital.

Thank you Interface Uganda for your support that has allowed me to have this wonderful learning opportunity. I am inspired and looking forward to working with my other trained colleagues to set up a burn unit at our Centre in the future.

**~Katusabe J Linda~**