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INTRODUCTION

Stevens-Johnson Syndrome (SJS) produces severe skin and mucous membrane lesions due to a hypersensitivity reaction to drugs. They present as bullous and erythematous lesions that lead to the detachment of the skin and mimics an extensive secondary burn. It mainly affects the face, neck and trunk, contributing to secondary infections, often by multidrug resistant microorganisms. Due to the loss of the superficial layer of the skin, the lesions are treated as burns.

OBJECTIVE

To verify the efficacy of a bio-cellulose membrane in the treatment of wounds in Stevens-Johnson Syndrome.

MATERIALS AND METHOD

Two patients with Stevens-Johnson Syndrome, treated with biocellulose dressings (Bionext)

- Case 1: 25 year old patient
- Case 2: 39 year old patient

Both with 80% of body surface area.

The following items were evaluated: ease of application, patient comfort, and time of treatment.

RESULTS

The biocellulose membrane provided comfort and less pain because it does not require any changes, only reapplication in the detached areas. Patients can bathe in water without salt.

- Case 1: re-epithelialization in 10 days.
- Case 2: re-epithelialization in 10 days.

CONCLUSION

The biocellulose dressing is an excellent therapeutic option for the treatment of Stevens-Johnson syndrome. It provides ease of application, less pain, and acceleration of epithelialization.



Face involvement, lips, oral mucosa, cornea



Rear trunk with membrane application



Anterior trunk



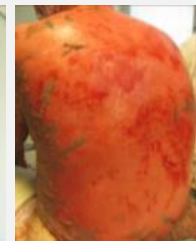
Lower limb skin healed



Face involvement, lips, oral mucosa, cornea



Restored face



Rear trunk with membrane application



Healed rear trunk



Lower limb involvement



Application of the membrane to the lower limb



Closed lower limb skin healed