Occupational Therapy – Kids health information

Scar management



ROYAL CHILDREN HOSPITAL

What is a scar?

A scar develops as part of the normal wound healing process. Within 2 to 3 days of the skin's surface being injured, scar tissue fills in the injured area to close the wound. Scar tissue can continue to develop over many weeks or months.

How does a scar mature?

Immediately following wound healing, a scar is usually red in appearance and is referred to as an 'immature' scar. Between 3 months and 2 years the scar should become paler, flatter and softer and can then be referred to as a 'mature' scar.

To help your scar mature it is recommended that you massage and moisturise your scar. Please refer to the handout titled 'Scar management – Massage and moisturising'.

All scars should be monitored carefully and if your scar becomes a problem contact your doctor or occupational therapist.

What is a problem scar?

A scar is a problem if it is:

- purple or red
- raised
- feels hard or itchy
- restricts movement.

Problem scars can sometimes be called hypertrophic or keloid scars.

Those at risk of developing a problem scar include people with:

- skin types known to scar easily, such as Mediterranean, Asian, African and indigenous Australian
- wounds that are delayed in healing (3 weeks or more)
- a past history of problem scarring.

What to do if your scar becomes a problem?

Contact your occupational therapist if your scar develops into a problem scar. Your occupational therapist will assess your scar and recommend treatment that may include taping, silicone gel, pressure or splinting. Treatment should commence as soon as the problem develops.

Precautions

It is important that your scar does not get sunburnt. If possible try to:

- wear clothing that covers your scar for example, wear a long sleeve t-shirt or hat
- use sunscreen (SPF 30 +) or zinc cream
- stay in the shade when outdoors.

Name of Therapist:

Phone:

Please contact your occupational therapist if you have any queries about the above information.

Scar management – Massage and moisturising



sheet M'

What is scar massage?

Massaging a scar involves rubbing and moving the skin and underlying tissue in a firm manner. When massaging, it is recommended that you use a non-perfumed moisturising cream such as, sorblene or vitamin E cream. This will help moisturise the scar.

Why massage?

Scar tissue may become hard and raised. Massage can help to soften and flatten the scar tissue.

Scar tissue may stick to the underlying muscles, tendons, blood vessels, nerves and bones. Massage can prevent this from happening and helps to keep the scar tissue flexible.

Scars may feel sensitive, tingle or hurt when touched. Regular massage can help to control this and eventually the sensitivity should settle down.

How to massage

Place the pad of your thumb or finger on the scar. Massage using a slow, circular motion so that the skin moves on the underlying scar tissue. Repeat this process across the entire scar. Use firm pressure, however do not cause any damage to the skin. Your fingernail tip will change colour from pink to white when massaging with the correct pressure. Your occupational therapist will demonstrate how to massage your scar.



When to massage?

- Start to massage your scar as soon as your wound is fully healed.
- It is usually recommended that you massage your scar
 2 to 3 times a day for 5 to 10 minutes each time.
- Continue to massage your scar until it has matured.
 A scar is mature when it is paler, flatter or softer.
- It is recommended that you continue to moisturise your mature scar regularly.

Precautions

- Do not massage open wounds.
- If your scar becomes sore, blisters, reopens or your skin develops a rash, stop massaging and contact your occupational therapist.

Specific recommendations

Name of Therapist:

Phone:

Please contact your occupational therapist if you have any queries about the above information.

Scar management – Adhesive tape

Why use tape?

Adhesive tapes apply gentle pressure to scars. This helps to reduce the possibility of the scar becoming thick and raised. Adhesive tapes can be used over wounds that are not completely healed or when scabs are still present.

What to use?

Your occupational therapist will advise you on what tape to use as there are a range of adhesive tapes available.

How to use tape

• Clean the wound or scar and surrounding skin with water.

Pat the skin dry.

Put the tape directly onto the scar.

Your occupational therapist will demonstrate how to do this.

- Your occupational therapist will advise you on how frequently you need to change the tape. Most adhesive tapes are changed every 1 to 5 days and can be left on when bathing or showering.
- When the tape needs to be removed you can use:
 - a) vegetable oil soak the tape with oil for 15 30 minutes before removing so that it will lift as easily as possible
 - b) commercially available adhesive remover, available from the chemist.

Precautions

In some individuals a rash can develop under the tape. If this occurs, leave the tape off, wash the skin with water and contact your occupational therapist.

Specific recommendations

Type of tape:



Hypafix / Mefix / Fixomull



Micropore



Wearing time:

Other:

Name of Therapist:

Phone:

Please contact your occupational therapist if you have any queries about the above information.

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Scar management – Silicone gel sheet

What is silicone gel sheet and why use it?

Silicone gel sheet is made from a clear, soft, medical grade silicone material that sticks to the scar. It is a safe and effective treatment that helps to flatten and soften scar tissue.

How to use the silicone gel sheet

- Silicone gel sheet should be precisely cut to fit the shape and size of the scar.
- Clean the scar and surrounding skin with water.
- Pat skin dry.
- Peel the silicone gel sheet off the protective plastic liner. Save the liner for later use.
- Place the sticky side of the silicone gel directly on the scar.
- The silicone gel sheet may be held in place with adhesive tape, tubigrip or a splint.
- If adhesive tape is difficult or painful to remove, soak the tape with vegetable oil for 15–30 minutes before removing.
- Your occupational therapist will advise you on the number of hours the silicone gel sheet needs to be worn per day.

Care of the silicone gel sheet

- Wash the silicone gel sheet at least once per day with soap and water.
- Rinse well and pat dry with a lint free cloth.
- When not in use, place the silicone gel sheet on the protective liner and store in plastic wrap or foil, away from direct sunlight.
- The silicone gel sheet should last for 6–8 weeks with proper care.

Precautions

- Do not apply the silicone gel sheet to open wounds, scabs or sutures.
- In some individuals, a rash can develop under the silicone gel sheet, especially on hot days or when playing sport. If this happens, remove the gel sheet and contact your occupational therapist.
- Do not put the adhesive tape or tubigrip on too tightly because this can irritate the scar.

Specific recommendations

Name of Therapist:

Phone:

Please contact your occupational therapist if you have any queries about the above information.