What happens if my skin graft fails?

If the skin graft fails, or takes longer than the normal period of time to heal, then your chances of scarring are much greater. It may also mean further surgery is required.

What should I be aware of when I go home?

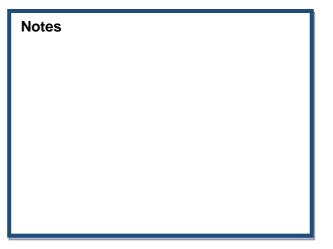
If you notice excess oozing through the dressings, if you develop a fever, or if the skin becomes more painful, hot or reddened around the dressing (or graft if it is visible) contact the Burns Dressing Clinic as soon as possible.

Contact details

Care of Burns in Scotland (COBIS) National Managed Clinical Network

NHS National Services Scotland Gyle Square 1 South Gyle Crescent Edinburgh EH12 9EB

Website: www.cobis.scot.nhs.uk
Email: NSS.COBIS@nhs.scot





Skin grafts



Information for patients

What is a skin graft?

Skin grafts are used when normal wound healing processes are unable to close a large skin defect, for example, in the case of burns.

The surgeon shaves the top layer of skin from an undamaged area (donor site) and uses this to help close a wound.

Skin grafts heal or "take" by new blood vessels growing into the graft and the skin graft attaching itself to the new area.

Donor sites may be taken from different sites on the body, but are commonly taken from the thigh, back or buttocks.

What can cause my skin graft to fail?

There are a number of factors that can cause a skin graft not to attach to the wound bed underneath (graft failure).

These are particularly important in the first five to seven days following surgery and include the following:

Tissue fluid or bleeding under the graft

Swelling is a natural response to a burn injury, however it is important to minimise the amount of fluid and the period for which it is present.

This is because swelling causes fluid to leak out from the body and create a barrier between the blood supply and the wound.

This makes it more difficult for oxygen, nutrients and healing factors to reach the wound.

Swelling can also be painful, cause joint stiffness and interfere with the normal functioning of the blood vessels and nerves.

Movement

To allow the graft to "take" it is important that it remains still and does not slide around the wound bed.

This means that movement must be restricted, particularly if the graft covers a joint or if it is on the leg.

You may be advised to rest in bed for a period of time, or to keep the limb still using a splint provided by your therapist.

Your doctor and therapist will inform you as to how long you will need to keep the limb immobile.

Infection

Infection slows the normal wound healing process as the body concentrates its efforts into fighting the infection rather than healing the graft.

Some infections at the graft site may result in complete failure of the graft to attach to the underlying wound bed, or it may mean that it takes a longer time for the graft to heal.

To prevent infection it is important that you keep the graft and your dressings dry, clean and in place until you are reviewed by the nursing staff, or unless you are instructed otherwise.

Smoking

Smoking can slow graft healing as the amount of oxygen in the bloodstream delivered to the graft is less than it would be otherwise.

Less oxygen may mean slower healing. Smoking may also increase the risk of developing an infection.

How do I protect my skin graft after surgery?

Members of the burns and plastic surgery teams can instruct you about how to protect your skin graft after your surgery. The following things can help:

- Keep the grafted area ELEVATED where possible— for example, if you have a burn on your hand you must keep your hand resting above the level of your heart
- IMMOBILISE the grafted area if it involves a joint
- Wear your SPLINT if your therapist has advised This
- AVOID SHEAR FORCES—be careful not to Knock or rub the skin graft
- AVOID TOUCHING OR MOVING THE DRESSINGS
- AVOID SMOKING—ask your doctor about Nicotine patches, and if you require information about quitting smoking please speak to a member of the Burns or Plastic surgery team.