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## Scanning the horizon: Emerging evidence in the pediatric wound care 2019

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There is an emerging awareness that hospitalized children and neonates are at risk for multiple cutaneous injuries. More than 40% of children entering our hospitals leave with scars; over 25% are non-intentional secondary to pressure injuries, medical adhesive device related injuries, PIV extravasations, infections, burns and surgical wounds. Over 50% of pediatric pressure injuries are medical-device related, most are avoidable. PIV extravasations are a common and at times, serious complication of neonatal stay. Medical adhesives related skin injuries are on the rise. Technology have advanced pediatric care to new height, but with that came a new wave in skin injuries. A common cause of delayed wound healing/ wound dehiscence is colonization with microbes, often leading to infection. Infection can impede the healing process by inducing a strong systemic and local inflammatory response. Most prevention and treatment protocols are

extrapolated from adult practice, despite the fact that many "adults" products are contraindicated in neonates. Studies support the use of non-medicated dressings in managing wound bioburden. Pediatric population is in great need of guidelines, protocols and less harmful treatment.

This presentation will present an overview of pediatric wound care state in 2019, most common injuries and discuss new, non-toxic products to heal pediatric wounds from actual case presentations, such as Active Leptospermum honey (ALH), dialkylcarbamoylchloride (DACC) coated dressing fibers , concentrated surfactant gel, amniotic membrane products as well as offer insight into preventative care and quality improvement in pediatric and neonatal care.

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