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# Burn Care Service Training as a Public Health Intervention

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## ABSTRACT

Burn injury is more common with low economic strata requiring holistic approach and support from multiple stake holders including the government to deal with this disability. Burn injury care is the specialized surgical service to be provided by highly trained human resource which can involve multiple specialist services, special care in a specialized burn center, special transportation service and financial coverage.

**Keywords:** burn injury; care; cost; training

Burn injury is one of the commonest forms of trauma in Nepal. Every year almost 50,000 burn injuries are being reported by Government of Nepal, Ministry of Health and Population.<sup>1</sup> This contributes significantly to the total national disability statistics. Due to low socioeconomic condition of this vulnerable group, low awareness level, and lack of timely care, the overall outcome of burn treatment in Nepal is very poor and the survival rate with major burns especially over 40% total body surface area (TBSA) has been very low.<sup>2</sup> Mortality due to fire burns in Nepal is higher than the average mortality of the South East region where 59% of all Global burn mortality occurs which is very alarming.

Universal Health Coverage component of the Sustainable Development Goals of the United Nations advocates for surgical and anesthesia services which also includes the provision of burn care.<sup>4</sup> In countries like Nepal where basic lifesaving surgical and anesthesia care is still a big challenge at national level, burn care is obviously not in the priority although there are provision of financial support from the Government for the treatment of diseases like cardiovascular disease, renal failure, cancer, Alzheimer's disease, Parkinson's disease, Head and Spinal injuries, Sickle Cell anemia and Stroke.<sup>5</sup> Burn care givers have not been able to make the stake holders understand that burn care is expensive and most burn patients are from the lower socioeconomic strata.

It is very encouraging that Nepal Health Training Center (NHTC) of Ministry of Health and Population has started providing training to health professionals working in many different health facilities in the primary care of burns. This will provide the knowledge and skill to the

participants to take care of the acute burn patients in the first 24 hours mainly in fluid resuscitation and wound care before referring the patients with major burn injuries for further treatment. This will ensure fluid resuscitation which is a very important component of the treatment. It is quite challenging to continue fluid resuscitation during the transportation of the patient to burn centers with the present standard of Ambulance service in Nepal.

Only a few dedicated burn centers are present at the moment in the country for providing burn care which are still in early stages of development. Critical Burn Care for this special group of burn patients is grossly lacking in Nepal. Plastic surgeons who are taking care of these patients with the help of anesthesiologists and other subspecialists are not trained in critical care. Thus the training of specialized 'Burn Surgeons' with the back ground of plastic surgery who will be able to take care of critically ill burn patients is the need of the day. The change in the outcome of major burn injuries will need multiple interventions but the improvement in specialized critical care is a major component of the intervention. Combined effort of care is required to recognize the specialty and enhance the care of burn patient at different hierarchy of care to bring positive changes in mortality and morbidity of this vulnerable group of populations.

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