Prehospital treatment of burns: A qualitative study of experiences, perceptions and reactions of victims

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\textbf{ABSTRACT}

Background: The manner in which burns are initially managed, at an incident scene, can affect the extent and depth of burn wounds and their final prognosis. The aim of this study was to understand people’s experiences, perceptions and reactions towards the initial management of burns and fire accidents in Ardabil Province, Iran.

Methods: In a qualitative study, 48 burn victims accompanied by their caregivers were enrolled. Focus group discussion (FGD) was used to collect data. All the interviews were recorded, transcribed and analysed using content analysis method.

Results: Four categories of information were retrieved in this study, including fire control, scald and burn wound management, seeking medical consultation and severity indicators. Uncertainty regarding what to do when someone catches fire was an evident finding that was explored through the discussions. The results revealed that transferring the patient to the hospital most often takes place after initial treatments administered at home. People believed that cooling a burn wound for a time longer than a few seconds may harm the wound. A strong belief in the efficacy of traditional remedies was disclosed when the statements of participants revealed that traditional or home-made remedies were widely used either to control pain immediately after burn and later during the wound repair process to accelerate the repair or to control the infection and prevent oedema and scar. Among these remedies, pennyroyal and grated potatoes seemed to be the most popular ones. Pennyroyal was thought to prevent infection and potatoes were used to relieve pain. People doubted the capability of health-care workers who work in rural health houses. People considered electrical burns and burns on the chest to be the most severe types of burns.

Conclusion: Inappropriate perceptions regarding initial management of burns existed among the participants that should be addressed in future quantitative research or through developing programmes on secondary prevention of burns.

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