

Editorial on Burn Rehabilitation Vinay Kille*

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Department of Microbiology, Acharya
Nagarjuna University, Guntur, Andhra
Pradesh, India

Editorial

Burn rehabilitation is an important and crucial aspect of the recovery process. It is a process that begins on the first day of admission and lasts for months, if not years, after the initial event. It does not occur after the healing of skin grafts or discharge from the hospital; rather, it is a process that begins on the first day of admission and lasts for months, if not years, after the initial event. Burns rehabilitation should not be done by just one or two people, but rather by a team that includes the patient and, where appropriate, their family. Burn rehabilitation encompasses the physical, psychological, and social elements of treatment, and it is normal for burn victims to have problems in one or all of these areas after a burn injury.

If left untreated, burns can cause highly debilitating and deforming contractures, which can lead to substantial disability. The goals of burn rehabilitation are to reduce the negative effects of the injury while maintaining range of motion. Maximizing functional capacity, psychological well-being, and social integration while minimizing contracture formation and scarring

Burn injury rehabilitation begins the day of the accident and continues for several years, requiring multidisciplinary efforts. To reduce the patient's post-traumatic symptoms and increase functional independence, a comprehensive rehabilitation programme is required. While a multidisciplinary team approach to therapy is ideal, where this is not possible or when therapists and support services are scarce, all members of the burns team can take responsibility for their part in rehabilitation to maximize the patient's benefit. While different practitioners are experts in their fields, there are several basic and efficient ways that can be used to assist the patient in reaching their full functional potential. It is the dedication of the members of the burn team, as well as their commitment to caring for the patient and encouraging them to participate completely in their recovery, that makes the difference. which can have a significant impact on their long-term quality of life.

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***Corresponding author:** Vinay Kille

✉ vinaykillae96@gmail.com

Department of Microbiology, Acharya
Nagarjuna University, Guntur, Andhra
Pradesh, India.

Tel: 8801858923

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are several basic and efficient ways that can be used to assist the patient in reaching their full functional potential. Individuals on the burn team's devotion and commitment to caring for the patient and encouraging them to participate and engage fully in their rehabilitation can make a significant impact in the patient's long-term quality of life.

The goal of this article is to share the fundamentals of burn rehabilitation and provide practical information that may be used by different experts working in the burns specialty (and taught to family members) to best support their patients. Beginning with admission, burn victims undergo a continuum of active care. There should be no distinction between a "acute phase" and a "rehabilitation phase"[2], as this concept can lead to secondary fragmented scar management and/or functional rehabilitation team inequity.

The stages of rehabilitation have been split into early phases and later phases of rehabilitation for convenience of following a patient care pathway; nevertheless, it must be acknowledged that there may be significant crossover between these two stages depending on the individual patient.