

Scar management

Looking after your scar.

What is a scar?

Scar tissue forms after there has been an injury or cut to your skin. First you will have a wound. As your wound heals your body will make new scar tissue that will change to form mature scar tissue.³

Signs of a mature scar:

- pale in colour
- flat and evenly contoured
- soft and mobile
- non-itchy
- doesn't restrict movement
- is acceptable in appearance.

What is a problem scar?

Approximately 15 per cent of patients have problem scars after surgery.¹

Characteristics of a problem scar can be:

- red, pink or purple in colour
- raised and uneven
- thick and/or stuck
- itchy or sensitive
- restricts normal movement.

It can take up to two years for a scar to mature. Scar management can be helpful during this time. Please watch your scar closely for at least three months for any signs of a problem scar.¹

How can I prevent a problem scar?

Everyday wound and scar care can help to prevent a problem scar from developing.

- keep your wound clean to avoid infections
- avoid too much skin tension (pulling on your skin) around your wound
- maintain a healthy diet
- do not smoke
- manage swelling^{1,3}

Age, ethnicity and some health issues can increase your risk of developing a problem scar. You should have your scar assessed early if you think you are at risk.



What should I do if I develop problem scar tissue?

If you notice signs of a problem scar, it is important to have it checked by a health professional. An occupational therapist will be able to talk to you about the best way to look after a problem scar.

Skin care

Studies show moisture evaporates more quickly from scar tissue. Moisturising your scar regularly can help to reduce itching and maintain hydration of scar tissue. Sun protection is important to prevent excess pigmentation in a scar.⁴ Avoid exposing your scar to sunlight and use a sunscreen with a high sun protection factor until the scar has matured.¹

Massage

Research studies are inconclusive; however, many people report scar massage helps to reduce itchiness, pain and sensitivity of a scar. Massage may improve skin movement around the scar and may even improve your mood. Ask your occupational therapist to check that your wound is ready for scar massage before you start. Your therapist can show you how to massage your scar.⁷

Taping

Too much skin tension may lead to a problem scar. Taping over your scar may be useful to control skin tension. This can be helpful from two weeks to three months after your wound is healed. Always have your wound assessed by your occupational therapist before you start using tape.^{1,2,4}

Silicone

Silicone scar products include gel sheeting, spray or a liquid gel applied directly to the problem scar. There is mixed evidence for the use of silicone scar products in preventing problem scars. However, recent studies show there may be some benefit in reducing itching, maintaining hydration and softening thickened problem scars.¹ These products are recommended for use for at least 12–24 hours per day for a minimum two month period, and should not be started for at least two weeks after a wound is healed.²

It is important to have your scar assessed by your health professional prior to commencing silicone scar products. You must also monitor for any reactions or side effects (e.g. skin rash, infection).²

Exercise and stretching

There is no specific evidence that looks at the impact of stretch and exercise on problem scars. Current expert opinion is that maintaining normal movement is important for maximising function and reducing the impact of problem scars. It is important not to stretch a fragile wound. Make sure you check with your occupational therapist which exercises and stretches are best for you.

Compression

Mechanical compression (compression garments) are shown to reduce problem scar formation by controlling the amount of oxygen and nutrients delivered to the scar.² For some types of scars, compression can be considered useful to start up to three

months after wound healing.¹ Check with your health professional to find out your recommended wear program which can be gentle compression (20–40mmHg) for up to 23 hours per day for 6–24 months.²

Camouflage

Some scars may never develop to look like normal tissue. Camouflage techniques can be useful to disguise scars and make them less obvious to the eye.

Techniques include:

- make up in a shade/colour to hide unwanted appearance of scars
- clothing or accessories that cover the scar (e.g. scarf, hat or jewellery)
- hairstyling
- facial prosthesis⁵

Extra techniques

Scar tissue should start to respond to the techniques listed within this brochure within six months of starting them. If you have a lot of problem scarring that does not respond to the techniques above then other measures may need to be considered.¹ This can include laser, corticosteroid injections, botulinum toxin injections, surgical revision, radiotherapy and other drug therapies. A referral to a medical professional qualified to use these techniques is required.^{2,4}

Please note the information contained in this brochure should be taken in consideration of advice and education from a qualified occupational therapist. Printed copies are uncontrolled.

References

1. Monstrey, S., E. Middelkoop, J. J. Vranckx, F. Bassetto, U. E. Ziegler, S. Meaume and L. Teot (2014). “Updated scar management practical guidelines: non-invasive and invasive measures.” *Journal of Plastic, Reconstructive & Aesthetic Surgery* 67(8): 1017-25.
2. Arno, A. I., G. G. Gauglitz, J. P. Barret and M. G. Jeschke (2014). “Up-to-date approach to manage keloids and hypertrophic scars: A useful guide.” *Burns* 40(7): 1255-1266.
3. Kerwin, L. Y., A. K. El Tal, M. A. Stiff and T. M. Fakhouri (2014). “Scar prevention and remodeling: A review of the medical, surgical, topical and light treatment approaches.” *International Journal of Dermatology* 53(8): 922-936.
4. Gold, M. H., M. McGuire, T. A. Mustoe, A. Pusic, M. Sachdev, J. Waibel and C. Murcia (2014). “Updated international clinical recommendations on scar management: Part 2 - Algorithms for scar prevention and treatment.” *Dermatologic Surgery* 40(8): 825-831.
5. Sidle, D. M. and J. R. Decker (2011). “Use of Makeup, Hairstyles, Glasses, and Prosthetics as Adjuncts to Scar Camouflage.” *Facial Plastic Surgery Clinics of North America* 19(3): 481-489.
6. O’Brien, L. and D. J. Jones (2013). “Silicone gel sheeting for preventing and treating hypertrophic and keloid scars.” *Cochrane Database Syst Rev* 9: CD003826.
7. Shin, T. M. and J. S. Bordeaux (2012). “The role of massage in scar management: a literature review.” *Dermatologic Surgery* 38(3): 414-23.