Use of Radix Scutellariae, Phellodendri Cortex, Rhizoma Coptidis, in Grade II AB Burn Patients with a Surface Area of 8% to 10% at Satiti Prima Husada General Hospital Tulungagung, Indonesia

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Abstract

Background: Severe burns but refuses debridement so an affordable alternative treatment with good results is needed. We report the delivery of a new therapy using MEBO ointment (Radix Scutellariae, Phellodendri Cortex, Rhizoma Coptidis) in pediatric patients with grade 2 A-B burns.

Case Report: Five-year-old girl weighing 16 kg with a diagnosis of Combustio grade 2A-B with a wound area of ± 8% to 10% due to exposure to hot water 3 days before entering the hospital. It was planned for debridement but refused and was treated using a wound care process, namely washing thoroughly with NaCl 0.9%, after that pouring savlon, then pouring NaCl 0.9% again and next using MEBO ointment, followed by giving sulfratule, wet gauze, dry gauze, then covered with rolled gauze.

Conclusion: MEBO ointment is quite effective in treating burns in children grade 2A-B with a wound area of ± 8% to 10% due to exposure to hot water without any reported side effects and in a relatively short wound healing time.

Keywords: Herbal Oint; MEBO cream; Burns; Combustio grade 2

Introduction

A burn (Combustio) is a trauma caused by the skin or tissue coming into contact with a heat source, namely electric shock, hot iron, hot water, and hot coals [1]. Trauma that causes burns can occur in everyday life. Burns don’t only have a physical impact, but can also have a psychological impact on sufferers. The impact given psychologically such as PTSD (Post Traumatic Stress Disorder) because the incident when experiencing burns can be remembered and the impact of the burn scars can affect the patient’s self-confidence [2]. The death rate due to burns according to WHO (World Health Organization) is estimated to reach 11,600 people each year in countries in Southeast Asia [3]. The incidence of burns in Indonesia itself has a prevalence of 1.3% where the province with the highest prevalence is Papua at 2.0%. Meanwhile, the prevalence in East Java is 1.0% [4]. In a study conducted at Cipto Mangunkusumo Hospital (RSCM) the causes of burns include hot water (20.5%), electric shock (10.9%), metal (1%), chemicals (2.7%), unknown causes (1.2%), other causes (4.3%) and mostly caused by fire (59.4%) [5].

Case Presentation

A 5-year-old girl weighing 16 kg who was diagnosed with Combustio grade 2A-B with a wound area of ± 8% to 10% in the right waist area due to exposure to hot water 3 days before entering the hospital. The patient was planned for debridement but refused due to cost reasons. Then the patient is treated in the room with the following stages using the wound care process, washing thoroughly with NaCl 0.9%, after that pouring savlon, then pouring NaCl 0.9% again and next using MEBO ointment, followed by giving sulfratule, wet gauze, dry gauze, then covered with rolled gauze.

Discussion

Exposure to high-temperature objects that touch the surface of the skin can cause tissue damage and increase tissue permeability, causing tissue edema. Initially, burns have three degrees, degree I (superficial thickness), degree II (partial thickness), degree III (full thickness). However, today there is a new degree, namely degree IV [6]. Burns due to loss of fluid from evaporation of tissue fluid...
are called degree I. Damage to skin tissue that reaches the papillary dermis layer so that fluid buildup causes bullae to appear and looks moist is called degree II A, while for degree II B some wounds reach the reticular dermis layer which causes burns to look dry white [1].

Treatment options for burns I-II A degrees today often use creams such as Silver Sulfadiazine or ointments (ointments) such as MEBO (Moist Exposed Burn Ointment) [7]. The principle of treating burns is to provide a humid atmosphere, healing will take place optimally because it is not exposed directly to the outside environment [8]. MEBO is an oil-based herbal paste that is said to be efficacious and inexpensive in treating burns, especially in Indonesia. MEBO is a topical burn remedy in the form of an ointment. MEBO is an herbal medicine with the main bioactive ingredients such as beta-sitosterol and berberine which function in the wound healing process in the inflammatory phase to re-epithelialization. MEBO topically on second degree burns can increase collagen formation, so that it can accelerate the wound healing process.

**References**


