

INCISION CARE



What is an incision?

An incision is a surgical “cut” into the skin during an operation. The incision may be closed with sutures, metal staples or small sticky strips (called *steristrips*) that are visible on the surface of the skin.

Some incisions may sometimes be sutured on the inside and invisible to the outside, still others may be closed with superglue or *dermabond*.

The skin edges usually form a seal within 24 to 48 hours. However the time this takes may vary from person to person and the location of the incision and the type of operation

How do I care for my incisions?

Most wounds heal without any problems. The most common complication is wound infection.

To reduce risks of infection, keep the wound clean and dry for 5 to 14 days. If the wound becomes wet from blood or any other liquid, it should be changed.

Day 1: Avoid showering or bathing. If you must shower, keep the wound dry with a water repellent dressing.

Day 2 onwards: Showering is preferred to soaking in a bath. Soaking might soften the wound and re-open the incision. Wash the incision gently with water. Dry or pat gently with a dry clean towel.

Remember do not put any soap, shower gel, body lotions or talcum powder or make up directly into a healing wound. Never apply cream or ointments unless instructed by your doctor. In particular ointments should not be used on incisions closed with *dermabond* as it can soften and loosen the glue.

Monitor daily for increasing pain, warmth, redness, swelling, weeping or leaking blood or pus from the incision site. If you develop any of the above please see.

How should I care for my dressings?

Not all incisions need dressings. Dressings are meant to:

- Absorb any leakage from the wound
- Provide ideal conditions for healing
- Protect the area and prevent dislodging of *steristrips*
- Prevent stitches or clips catching on clothing

If a wound dressing is needed, follow the instructions given to you by the doctor or nurse. Ensure a clean preparation surface for your dressing supplies. Wash your hands thoroughly with soap and water before removing the dressing and applying a fresh dressing. Avoid touching the healing wound with your hands. Apply the dressing as directed by your doctor or nurse. Dispose of the used dressings and supplies in a secured plastic bag.

How will the stitches be removed?

Some deep (internal) sutures are made from absorbable material and do not need to be removed. Absorbable sutures usually disappear in 7 to 10 days.

External stitches and staples will be removed after 5 to 21 days depending on the site and type of surgery, presence of infection or conditions that affect healing eg diabetes and smoking

Your doctor or nurse may apply *steristrips* to provide additional wound strength. These steristrips are usually left on until they come off from the incision line or removed when advised by your doctor or nurse.

Some wounds may be closed with superglue or *dermabond*. This usually falls off on its own in 1-2 weeks. If the wound is healed and you must remove it earlier, petroleum jelly can be applied to soften the glue which is then gently peeled off.

How can I improve healing?

- Limiting irritation and movements to the area of incision can help healing eg wearing tight clothing that will irritate or rub the incision line, and avoid activities that pull the edges of the incision
- Healing scars will darken and become more noticeable if exposed to the sun, so limit sun exposure and use a PABA-free sunscreen (SPF 15 or more) for up to 6 months after the wound has healed and all the sutures or staples have been removed.
- Avoid applying make-up, perfume, deodorants or skin products that contain alcohol directly on the incision line until it is healed
- If you need to shave, use an electric shaver around the incision line to minimise cuts or infection.
- Rarely does a thick irregular scar (keloid) develop. This is due to excessive tissue growth. Keloid management should be discussed with your doctor

When to contact the clinic?

It is recommended that you contact the clinic if you observe:

- Increasing redness and/or swelling around the incision line
- Increased discomfort and pain around the incision line
- Increased warmth of the skin around the incision line
- New or excessive weeping or drainage of liquid, blood or pus from the incision line
- Increased body temperature or fever of more than 38°C