

Your child's scar revision surgery

This leaflet is about your child's procedure to treat a scar that is painful, itchy or unsightly, or restricts their movement. It explains what you should do before your child's procedure, on the day of the procedure and when you return home.

Your child's condition and procedure

Why does my child need to have their scar treated or revised?

A scar is a mark left on the skin after a wound or injury has healed. This is the body's natural way of healing and replacing lost or damaged skin. Most scars fade with time but they never disappear completely.

Scars can cause problems if they are large, restrict movement or become keloid or hypertrophic.

- **Keloid scars**

Keloid scars are large scars raised above the skin. They happen when the body releases too much of a protein called collagen at the site of a wound. This causes an overgrowth of tissue. The scar keeps growing, even after the wound has healed. It extends beyond the original wound area. Keloid scars can be pink, red, skin colour or darker than the skin around them.

- **Hypertrophic scars**

Hypertrophic scars are thick scars raised above the skin. Like keloid scars, they happen when too much collagen is produced at the site of a wound. However, unlike keloid scars, hypertrophic scars stay within the original wound area and may become less noticeable with time.

There are also other types of scars. For example, scar contractures are often caused by burns. When a scar forms or heals, it pulls the edges of the skin together. This causes a tight area of skin and a restriction in movement.

Your child is having this procedure because their scar is noticeable, painful or itchy. A visible or troublesome scar may:

- affect your child's self-confidence
- be uncomfortable
- restrict movement if it is tight and near a joint

It is not possible to remove scars completely. However, we may be able to do scar revision surgery to improve your child's scar. The procedure may:

- make the scar appear more natural and blend better with the surrounding skin
- make the scar less noticeable by covering it with healthy skin taken from another part of the body (a skin graft)
- release a tight scar that is close to a joint to improve movement

If your child has a keloid scar, the aim of the procedure is to reduce the scar tissue surgically. Your child may need to continue treatment with steroid injections to stop the scar growing again.

Are there any other treatment options to this procedure?

There are many non-surgical options that can help to improve the appearance of your child's scar. We have a large department for scar management and can refer your child, if needed.

We can explain how to look after your child's scar to get the best outcome. While the wound is healing, you can try gently massaging the area and using moisturising cream regularly. You also need to protect your child's skin from the sun.

Other possible treatments include:

- covering the scar with skin camouflage make-up
- using scar tape to protect the wound, apply gentle pressure to the scar to reduce swelling, and improve healing
- using silicone gel, tape or sheets on healing skin to help soften and flatten a scar or ease itching and discomfort
- wearing a pressure clip or pressure dressing made from stretchy, elastic material over the scar to flatten and soften it
- having steroid injections to flatten a scar and reduce any swelling
- having laser treatment to reduce the redness in a scar or make it flatter by removing the top layers of skin (you usually need to pay for this treatment privately)
- using liquid nitrogen to freeze and flatten keloid scars, and stop them growing (this treatment is called cryotherapy)

Often, a mixture of different treatments can be used. We usually do surgery in more serious cases if non-surgical treatments do not help.

Before your child's procedure

What needs to happen before my child's procedure?

We need to see your child at a pre-admission clinic. This clinic may take place face to face or online. We make sure that your child is ready for an anaesthetic, which is a medicine to make them sleep during the procedure, and surgery.

After the pre-admission clinic, our admissions team contacts you by letter, text message or phone. We offer you a date for your child's procedure.

Your child should not eat for 6 hours before the procedure. They can drink water until they arrive at the Evelina London children's day surgery unit. We give you more guidance about this (fasting instructions).

Do I need to get pain medicine ready for my child?

Please make sure that you have a week's supply of paracetamol (a painkiller) and ibuprofen (an anti-inflammatory medicine) at home before the procedure. We do not routinely give these medicines to take home for your child after day surgery.

You can buy paracetamol and ibuprofen from a pharmacy, supermarket or shop. Paracetamol for children may also be called Calpol[®]. Ibuprofen for children may also be called Calprofen[®] or Nurofen[®]. You need the type of medicine that you would give your child if they were unwell with a cold or ear ache. If your child cannot take paracetamol or ibuprofen for any reason, please speak to their healthcare team about other options.

On the day of the procedure

When you arrive at the children's day surgery unit

We give you a time to arrive at the Evelina London children's day surgery unit. It is important that you arrive at the correct time and have followed the fasting instructions for your child. If you arrive late or have not followed the fasting instructions, we may not be able to do the procedure.

You and your child meet the surgical and anaesthetic teams on the admissions ward before the procedure. We confirm that you have given your permission (consent) for the procedure. You can ask us any questions that you may have.

During the procedure

We give your child a general anaesthetic. This is a medicine that makes your child sleep and stops them feeling any pain during the procedure. You can stay with your child until they are asleep. Please see our separate leaflet called "Your child's general anaesthetic" for details.

When your child is asleep, the surgeon makes one or several small cuts in the skin. They remove or change the position of the scar tissue and close the wound with stitches. A new scar will grow. However, the aim is to make it less obvious than before, blend with the surrounding area and improve the healing process.

Sometimes, the surgeon takes a piece of healthy skin from another part of your child's body and attaches it to the scarred area. This is called a skin graft.

If your child's procedure is to treat a keloid scar, we may give them steroid injections immediately afterwards. This is to prevent the scar from growing again.

Are there any risks to my child's procedure?

Every procedure has some risks of complications. To reduce these risks, we make sure that your child is well at the time of the procedure. We talk to you about the risks in the clinic and before the procedure when we confirm that we have your consent.

The specific risks of scar revision surgery are:

- bleeding
- an infection that needs to be treated with antibiotics
- fluid building up under the surface of the skin that needs to be drained (a seroma)
- discoloured skin, the scar not improving as expected or, in rare cases, the scar being larger than before
- numbness or pain around the scar. This usually settles within a few weeks, but may continue in rare cases

It is important to have realistic expectations about the procedure and remember that we cannot remove scars completely.

After your child's procedure

How will my child look and feel after their procedure?

Your child may feel drowsy after their surgery and sleep for a while. They may be restless (agitated) and upset for up to an hour after waking up from the procedure. Some children may have pain and feel or be sick (vomit), but this is not common.

During the procedure, we may give your child painkillers, fluids, anti-sickness medicines and a local anaesthetic. The local anaesthetic is medicine to make the area around the wound numb.

Will my child be in pain after their procedure?

Your child usually has a local anaesthetic medicine during their procedure. This medicine gives them pain relief for several hours after they wake up.

When your child is awake, we may give them paracetamol, ibuprofen or both medicines. You can continue to give your child these medicines as needed when they are at home. The nurses can guide you when the next amount (dose) of pain medicine is due.

When can my child eat and drink or feed after their procedure?

Your child should be able to eat and drink or feed as usual within 1 to 2 hours of the procedure.

Do we see the surgeon after my child's procedure?

Yes, the surgeon comes to check your child after their procedure. They update you about the surgery and answer any questions that you may have.

When can my child go home?

Your child can go home on the same day as their procedure when they:

- feel comfortable
- can manage (tolerate) their usual food and drink
- are not feeling sick (nausea) or being sick (vomiting)
- are behaving as they usually do

Please supervise your child carefully on the journey home. According to the sudden infant death syndrome (SIDS) guidelines, it is best to avoid long car journeys for babies under 1 year of age. If you travel home by car, it is important that:

- you stop for frequent breaks to feed your baby and change their position
- an adult sits with the baby in the back of the car

After you go home

How do I care for my child's wound after the procedure?

After the procedure, the surgeon or a member of their team gives you specific instructions about your child's wound and dressings. They explain how to look after your child's wound while it heals and what follow-up care you can expect.

Your child usually needs to wear dressings over the wound for 5 to 7 days. We then see them in the clinic for a wound check or you have a phone appointment. If the dressings fall off before then, please follow this guidance:

- Use the extra dressings that we have given you or call the plastic surgery team for advice. You can find the contact details at the end of this leaflet.
- If you cannot dress the wound again and it is outside working hours, you may need to contact a GP or go to your nearest emergency department (A&E). They can then replace your child's dressings.

It is important to keep the area around your child's wound clean and dry until their first wound check. When your child has a bath or shower, be careful not to get the dressings wet.

We explain if your child's stitches are dissolvable or need to be removed. Please do not start gently massaging the scar area until we tell you that it is safe. This is usually 1 month after the procedure.

Finally, you need to take extra care to protect your child's skin from the sun while their wound heals. Try to avoid exposing the scar to the sun for at least 6 months after the procedure. You need to put a strong sunscreen on your child when they go outside. The label of the sunscreen should have:

- a sun protection factor (SPF) of at least 50 to protect against UVB
- at least 4-star UVA protection

UVB and UVA are types of ultraviolet rays from the sun that can damage the skin.

How should I look after my child at home after their procedure?

After scar revision surgery, we recommend giving your child paracetamol and ibuprofen regularly for up to 1 week and then as needed. Please remember to buy these medicines before the day of your child's procedure. It is also important to make sure that your child drinks plenty of fluids.

It is safe to give the 2 medicines at the same time, ideally with food. This is easier to plan and the medicines work in different ways. You can give your child:

- 1 recommended amount (dose) of paracetamol every 4 to 6 hours and no more than 4 doses in 24 hours
- 1 dose of ibuprofen every 6 to 8 hours and no more than 3 doses in 24 hours

You may find the following chart helpful to keep track of your child's medicines.

Home medicine chart for parents

Medicine	Time to give	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Paracetamol								
Ibuprofen								

Do I need to look for any symptoms after my child's procedure?

Contact a GP or the plastic surgery team if you feel that your child is unwell, or you notice:

- bleeding
- signs of infection, such as pain, severe swelling, hardening or thickening of the skin, redness that spreads on the skin, a bad smell from the wound and leaking yellow-green liquid called pus or watery fluid
- a high temperature (fever)
- your child is not eating or drinking well

On white skin, the area around the wound can appear red if it is infected. On brown or black skin, the area can appear red or purple but it may be more difficult to notice the redness. An infected wound site may feel warm or hot to touch on any skin colour. If you are very concerned or notice these symptoms outside of working hours (Monday to Friday, 9am to 5pm), call 999 or go to A&E.

Do you see my child again after their procedure?

We may give you a date for a follow-up appointment while you are still in the children's day surgery unit. It is most likely that you will get a phone call from our team in the next few days.

Contact us

If you **cannot keep your appointment**, contact our admissions team, **phone** 020 7188 9098, **email** gst-tr.paediatricadmissions@nhs.net

If your child has a **cough, cold or high temperature** in the 2 weeks before the procedure, contact our pre-assessment team, **phone** 020 7188 7188 extension 58209

If you have any **concerns during working hours (Monday to Friday, 9am to 5pm)** about your child's surgery, call the paediatric plastic surgery clinical nurse specialist, **phone** 07747 204 489

If you have any **concerns outside working hours (Monday to Friday, 5pm to 9am or at the weekend)** about your child's surgery, contact the on-call plastic surgery doctor through the main switchboard, **phone** 020 7188 7188 and ask for bleep 0155

If you have any **concerns from 24 hours after surgery** about your child's health, contact your child's specialist surgical team or GP surgery, or **phone** NHS 111

If you are concerned that your child is **seriously unwell** at any time, go to your nearest A&E or **phone** 999

For more information on conditions, procedures, treatments and services offered at our hospitals, please visit **web** www.evelinalondon.nhs.uk/leaflets



Leaflet number: 5401/VER1

Date published: June 2023

Review date: June 2026

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A list of sources is available on request