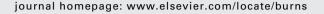


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## Psychological and psychosocial functioning of children with burn scarring using cosmetic camouflage: A multi-centre prospective randomised controlled trial

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#### ABSTRACT

Background: Burns leave patients with long-term physical scarring. Children with scarring are required to face challenges of reintegration into their community, including acceptance of an altered appearance and acceptance by others. This can be difficult given society's preoccupation with physical appearance.

Limited research exists investigating validity of cosmetic camouflage as a psychosocial intervention for children with scarring. This study investigated whether using cosmetic camouflage (Microskin<sup>TM</sup>) had a positive impact on health-related quality of life, self-concept and psychopathology for children and adolescents (8–17 years) with burn scarring. *Method:* A prospective multi-centre randomised controlled trial was conducted across Australian and New Zealand paediatric hospitals. 63 participants (49 females, mean age  $12.7 \pm 2.1$  years) were enrolled. Data points were baseline (Time 1) and at 8 weeks (Time 2) using reliable and valid psychometric measures.

Results: Findings indicate there were significant improvements in socialisation, school and appearance scales on the Paediatric Quality of Life Inventory and psychopathology scores particularly peer problems decreased. However self-concept remained stable from baseline throughout intervention use.

Conclusion: Cosmetic camouflage appears to have a positive impact on quality of life particularly socialisation. Cosmetic camouflage is a valid tool to assist children with scarring to actively participate socially within their communities.

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#### 1. Introduction

It is well reported in the literature that the focus of burns research has progressed to include the long-term psychosocial

functioning of patients, both adult and child as survival from this serious injury is now a common outcome. However, research investigating the psychosocial aspects of burn shows a great deal of variance in specific research areas, methodologies, and results. Findings have been equivocal with some

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showing this population struggle with long-term adjustment, reintegration and rehabilitation after the injury and subsequent scarring [1-3]; others highlight that they cope and adjust well [4-7]. Psychosocial functioning includes quality of life, self-concept, body image, social and emotional functioning, psychopathology such as behavioural difficulties and more significant diagnoses such as post-traumatic stress disorder (PTSD). These have all been studied to varying degrees within the burn literature. However, few studies have investigated how positive psychosocial adjustment is achieved or what interventions support patients to achieve positive long-term psychosocial functioning particularly related to scarring and an altered appearance. Some studies have explored the use of cosmetic camouflage [8], Cognitive Behavioural Therapy [9] and Social Skills Training [10]. The aim of the present study was to determine whether improving scar appearance for young people through the use of a cosmetic camouflage (Microskin<sup>TM</sup>) would have a beneficial effect on psychosocial functioning particularly quality of life, behaviour, self-concept, and family dynamics.

Some studies have found that children with extensive burns report self-concept, body esteem and behaviour within the normal range or higher [4-7]. Lawrence et al. reported gender differences, with male burn survivors not differing from age-matched controls, but females reporting better body esteem than the comparison group [5]. Robert et al. found that within self-esteem, burn-injured children scored lower on physical appearance and athletic competence but higher than average on social competence [6]. Landolt et al. when investigating health-related quality of life and PTSD found that only social functioning was below the norm for burned children compared to healthy counterparts [11]. Sheridan et al. also examined quality of life of children surviving massive burns and found that most had satisfactory quality of life, however this study did not include a physical appearance component [12]. Similarly, Pope et al.'s comparison study found that young burn survivors reported a better quality of life than a control group suggesting survivors were able to reflect realistically about their injury and scarring, may be dissatisfied with their burned parts, but are positive overall about their quality of life and body-image [13]. It has been argued that this population place more emphasis on areas of they can control (e.g., academic performance) and less on domains out of their control (e.g., appearance) and therefore may have an overly positive self-regard which is used as a coping mechanism [7].

In contrast, other studies have found that burn-injured children and adolescents experience significant problems with quality of life particularly appearance [3], overanxious disorders and phobias, depressive symptoms and the presence of PTSD [2,14] which may be in the context of parental separation and/or dissociative responses during burn treatment [1] which can be painful and traumatic [15,16]. Overall, these studies suggest that the long-term effects of scarring and an altered appearance can impact greatly on quality of life and socialisation of this population as it is a reminder of the traumatic incident. They may be subjected to challenging social experiences including stigmatisation, staring and negative verbal remarks connected with the high importance placed on appearance in society [17,18].

Self-concept plays a significant role in mediating positive contributions of social support to the emotional and behavioural adjustment of young adolescents [19] and is particularly important when considering young burn survivors as social support predicts better self-esteem, more positive body image and overall adjustment in this population [20,21]. Abdullah et al. explored the link between visible scarring and self-concept for paediatric burn patients finding that as the number of visible scars increased, patient's scores for physical appearance and happiness and satisfaction decreased [21]. Other domains of self-concept were not affected [21]. It is well documented that people with disfiguring conditions experience challenges, anxiety, and difficulties in respect to social interaction: their visible difference has a profound psychological impact [18,22–24].

Negative responses to visible physical differences may include startled responses, stares, avoidance, unsolicited questions and comments, teasing, rude behaviour and bullying [25]. Self-consciousness and discomfort regarding their altered appearance or from others' responses may lead to angry, aggressive, inappropriate behaviours [26]. Strong relationships exist between self-concept, self-evaluation of physical appearance and affective states suggesting burn survivors whose physical appearance is marked by scarring may suffer from low self-concept and sad or depressed affect [6] and may also harbour feelings of guilt and responsibility regarding the injury which may further impact on their self-concept.

In summary, the review of the literature suggests some children with burns adapt to their changed appearance relatively positively, but many struggle with poor perceived physical appearance, damaged body image and problems with socialisation. The high importance placed on appearance for individuals in today's society also impacts upon achieving adjustment to an altered appearance. Considering this, cosmetic camouflage may be a valid intervention to give this population some reprieve from the continual need to manage societal and personal challenges and expectations.

Cosmetic camouflage, the skilled use of camouflaging makeup [27] can conceal visible scarring and improve overall social and psychological well-being [27,28]. Holme et al. found that quality of life as well as social and psychological well-being increased significantly for 56 adults with disfigurement (e.g., vitiligo and scarring) after attending a cosmetic camouflage clinic [8]. However, differing views about cosmetic camouflage exist in the literature. For example, Kent [29] argued that cosmetic camouflage could be seen as concealment and therefore a negative or avoidant coping mechanism. Nevertheless, when Kent [30] examined the effects of a skin camouflage service on well-being and appearance anxiety of 34 adult patients with skin conditions (mainly vitiligo and scars), the results indicated that those who found the cosmetic cream effective also experienced improved psychological well-being.

There are few paediatric studies investigating cosmetic camouflage. Tedeschi et al. in an Italian study found substantial improvements in quality of life for fifteen children aged 7–16 years with a range of skin conditions [31]. Our own work conducted in Australia, on camouflage for children with burn scarring found that children reported feeling happier, more confident and enjoyed social outings after using the cosmetic camouflage, Microskin<sup>TM</sup> [32]. Both of these studies

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