



University of Michigan
Medical School

Silverlon® use in Afghanistan, 2003

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The purpose of the Combat Support Hospital (CSH) is to return injured, sick, and wounded soldiers to duty, and to clear the battlefield of soldiers who cannot return to duty. For soldiers who can not return to duty, care is limited to stabilization prior to transfer for definitive care. Because of this, the care of burn injuries is restricted to initial resuscitation and then transfer to a burn center. In Afghanistan, the CSH has expanded its mission to include care for the local population who sustain injuries that threaten life, limb, and/or eyesight. This change created many challenges for our hospital. Amongst those was the care of the local population injured by land mines and burns. We cared for adults and children. Silver sulfadiazine (SSD) is the only topical antimicrobial on the formulary for a Combat Support Hospital (CSH). Burn care in an austere, field environment has special challenges. We had a 44 bed hospital built out of a sophisticated tent system referred to as DEPMEDS (deployable medical system). This is a well-equipped system for an austere environment, but has many limitations, including a small number of personnel, limited water and constrained space. The entire course of burn care was performed during the hospitalization of these patients. Some patients were hospitalized for several months

We used Silverlon for dressing changes in 10 burn patients and 8 patients with complex wounds as a result of mine injuries. All of the patients were Afghan Nationals. Eight of the 10 burn patients were less than 12 years old. Four of the 8 mine-injured were 16 or younger. The dressings were left in place from 3 – 7 days. The Silverlon was reused, for a total application time of 7 days. The time required for dressing changes was slightly longer than the SSD dressings; however, the decreased number of dressing changes alleviated a considerable work load associated with the daily or BID SSD dressing changes. There was no cellulitis or burn wound sepsis in the patients in Silverlon.

Silverlon was successfully used in a few patients in an austere setting. As a result of this experience, it has been added to the armamentarium of the United States Army.

Sensitivities: Zones of Inhibition (mm)

	Coagulase Negative Staph (CNS)	Methicillin Resistant (MR) CNS	Coagulase Positive Staph (CPS)	MR-CPS	Acineto-bacter	Entero-bacter cloacae	Pseudomonas aeruginosa	Vancomycin resistant Enterococcus (VRE)	Candida albicans
SSD	20	20	17	19	18	15	15	14	17
Silverlon	17	17	14	16	14	11	15	13	17



452 Combat Support Hospital
Milwaukee, Wisconsin
Afghanistan's Trauma Center
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