

International Conference on

WOUND CARE, TISSUE REPAIR AND REGENERATIVE MEDICINE

&

8th World Congress on

BREAST CANCER MANAGEMENT AND THERAPY

 June 14-15, 2018 | London, UK

A sweet solution: The use of medical-grade honey on oral mucositis in the pediatric oncology patient


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Pediatric patients develop mucositis after chemotherapy and radiation. The gastrointestinal mucosa's epithelial cells divide quickly causing ulceration. The most common and sensitive is oral mucositis. Patients developed painful, bleeding ulceration, thick mucoid saliva and cracked and bleeding lips. Antimicrobial, antihistamine and analgesic mouth rinses are the mainstay for pediatric patients. The taste or texture may lead to refusal. Patients less than a year are unable to use these products. Continued oral mucositis leads to increase pain, and refusal or inability to eat. Alternatives to standard treatments were necessary. Leptospermum honey was added to daily mouth care. At completion of this case series, treatment was used in 10 pediatric oncology patients between the ages of nine months and 17 years. The

goal was to demonstrate the improvement of oral mucositis with standard oral care and the additional use of active Leptospermum honey in pediatric patient oncology patients. The patient received oral care every four hours followed by the application of the Leptospermum honey paste two to three times daily. The paste was applied with a sponge swab, coating the mouth. Patients either swished and spit or had excess suctioned out. Three selected examples of the ten patients are presented. Leptospermum honey paste proved to be effective in all participating patients. Observed healing occurred within three days, and patients in all cases reported decreases pain. Decrease in wounds and bleeding was evident in all cases within five days.

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