

All Databases

PubMed

Nucleotide

Protein

Genome

Structure

OMIM

PMC

Journals

Books

Search PubMed

for

Go

Clear

Limits

Preview/Index

History

Clipboard

Details

Display

Abstract

Show

20

Sort by

Send to

[About Entrez](#)[Text Version](#)**Entrez PubMed**[Overview](#)  
[Help | FAQ](#)  
[Tutorials](#)[New/Noteworthy](#)   
[E-Utilities](#)**PubMed Services**[Journals Database](#)  
[MeSH Database](#)  
[Single Citation Matcher](#)  
[Batch Citation Matcher](#)  
[Clinical Queries](#)  
[Special Queries](#)  
[LinkOut](#)  
[My NCBI](#)**Related Resources**[Order Documents](#)  
[NLM Mobile](#)  
[NLM Catalog](#)  
[NLM Gateway](#)  
[TOXNET](#)  
[Consumer Health](#)  
[Clinical Alerts](#)  
[ClinicalTrials.gov](#)  
[PubMed Central](#) 1: [Burns](#). 1998 Dec;24(8):733-8.[Related Articles, Links](#)**Effect of growth hormone therapy in burn patients on conservative treatment.**[Singh KP](#), [Prasad R](#), [Chari PS](#), [Dash RJ](#).

Department of Endocrinology, Postgraduate Institute of Medical Education and Research, Chandigarh, India.

Evaluation of growth hormone therapy in burns is limited and none is reported from developing countries where burns still carry high mortality. We analysed serial observations on the clinical and biochemical profiles in 13 patients with second and third degree burns who received recombinant human growth hormone (rhGH) (0.5 IU/kg body wt) for 2 weeks in addition to standard conservative treatment and in 9 patients who were managed with standard conservative treatment only. The two groups of patients had burns, comparable in extent and severity. Additional rhGH treatment resulted in improved wound healing ( $p < 0.001$ ), delayed separation of eschars ( $p < 0.01$ ), increase in haemoglobin ( $p < 0.05$ ), serum albumin ( $p < 0.01$ ), calcium ( $p < 0.05$ ), phosphorus ( $p < 0.001$ ), glomerular filtration rate ( $p < 0.05$ ) and 7 fold elevation in IGF-1. Also, a reduction in weight loss ( $p < 0.01$ ), nitrogen production rate ( $p < 0.05$ ), catabolic index ( $p < 0.01$ ), duration of sepsis ( $p < 0.01$ ) and hospital stay by 40% ( $p < 0.01$ ) was noted with rhGH therapy. Transient hypercalcemia (3 patients), albuminuria (2 patients) and elevated blood glucose (one patient) were noted in the rhGH treated group not necessitating any specific therapy. Mortality in rhGH treatment group was 8.3% compared to 44.5% in the "no rhGH" treatment group. These observations suggest significant benefits of short term rhGH treatment in burn patients on conservative management.

PMID: 9915674 [PubMed - indexed for MEDLINE]

Display 

Show

20

Sort by

Send to

[Write to the Help Desk](#)[NCBI](#) | [NLM](#) | [NIH](#)[Department of Health & Human Services](#)[Privacy Statement](#) | [Freedom of Information Act](#) | [Disclaimer](#)