



# Scars and Healing

*How to care for your incision*

This handout explains incision scars and how to help them heal.

## What is scarring?

Scarring occurs as the skin heals after being damaged. It is a complex process that involves many different phases.

Many factors affect the scarring process. We cannot predict exactly how scarring will occur for a certain person, or even for 2 different scars on the same person. And, while we can do some things to assist the scarring process, we still cannot guarantee that you will have a “good” scar.

## Scarring Phases

There are several phases in the scarring process:

- *Inflammatory phase* – the wound is red or pink as the body tries to clean and seal the incision. This can last for days or weeks, depending on how severe the injury is.
- *Rebuilding phase* – the wounded skin returns to about 85% of its normal strength. This phase can take weeks or months.
- *Maturation phase* – the last of the inflammation and redness slowly go away. Maturation can take months to years. A wound that heals well will be pale, narrow, and flat – just a faded reminder of what the scar looked like at first.

## Sealing

- Most incisions seal (close) in 24 to 48 hours. Once they are sealed, it is OK to rinse them or take a shower.
- If small, shallow wounds are not sealed after 2 days, some patients can use an antibiotic ointment 2 to 3 times a day to help speed the sealing process. Bacitracin, Neosporin, or any antibiotic ointment will work. You can buy these “over the counter” (without a prescription). Ask your doctor if you can use an antibiotic ointment on your wound, if needed.

## **Water and Showering**

- Do not soak your incision. Water can soften and reopen it. Do not take a bath, soak in a hot tub, or go swimming until your wound is sealed firmly and your surgeon tells you it is OK.
- After 48 hours, you may shower. Use gentle soap and lukewarm water to gently clean your incision. Do not scrub. After showering, do not rub your incisions. Gently pat it dry with a clean towel. Or, use a hairdryer on the warm setting to dry the area. Do this every day to keep the area clean while it heals.

## **Tape**

- Incisions are often covered with small strips of tape called Steri-Strips. These tapes help protect and seal the skin.
- Steri-Strips will fall off in about a week. If they become loose, you can trim off any loose parts.

## **Sun**

- Sun exposure can either darken or lighten a scar. This color change usually goes away, but it can last up to 2 years.
- You can keep your scar from changing color by protecting it from the sun:
  - Use sunscreen with an SPF of 30 or higher.
  - Cover your scar with a bandage that lets air in. Do not use plastic or other bandages that allow moisture to build up, because moisture can cause an incision to open up.
  - For head and neck wounds, wear a hat or scarf or other clothing over the wound while it heals.

## **Nutrition**

To heal, your body needs protein, vitamins, and minerals. These nutrients are especially important to the healing process:

- Vitamin C
- Zinc
- Iron

Take a daily supplement of these nutrients to help your wound heal. This should be in addition to your daily multivitamin.

## Massage

Massage uses both pressure and ointments for healing. Studies show that firm pressure may be the most important healing factor in scarring. But, there are some ointments that can be used to speed healing. These include:

- Aquaphor
- Eucerin
- Bacitracin
- Cocoa butter
- Aloe
- Silicone gel

We recommend starting massage treatment about 3 weeks after your surgery, when your incision is getting stronger and more stable. Use ointment and massage the area 3 times a day for 10 minutes each time. Do this for several months.

## Silicone

Studies show that using silicone, in gel or sheet form, helps scar tissue form. It is used on closed, healed incisions to manage existing *hypertrophic scars* and *keloids* (see page 4), or to prevent these from occurring after an incision has healed. For best results, use silicone 12 to 24 hours a day for 2 to 4 months.

### *Silicone Adhesive Sheets for Body Scars*

Silicone adhesive sheets are soft, self-adhesive dressings that are used for body scars. They can be cut to fit your scar. Tapes like the “Hypafix” brand are best to keep these sheets in place. Paper tape may also be used.

Remove the silicone when you shower. Clean the silicone sheet with soap and water and then reuse it. Replace it with a new one after 2 to 3 weeks, or when it begins to fall apart.

Silicone sheets are available online by searching for “silicone sheets.” Sheets that are 100% silicone work best. Popular brands are Cica-Care, NewGel, and Retouch.

Check with your health insurance company to see if they cover the costs of these silicone sheets. The diagnosis codes are:

- 701.4 for keloid scar
- 709.2 for scar condition

## Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help.

Weekdays from 8 a.m. to 4 p.m., call the Surgical Specialties Nurse Advice Line at 206-598-4549.

After hours and on weekends and holidays, call 206-598-6190 and ask for the resident on call for Surgery to be paged.

Or, ask for your surgeon to be paged:

Dr. \_\_\_\_\_.

### ***Cimeosil Topical Scar Gel for Facial Scars***

For scars on your face, use Cimeosil topical scar gel. It is available online at [www.cimeosil.com](http://www.cimeosil.com). The 14-gm tube can last up to 90 days when used every day on a scar that is 3 to 4 inches long. You can put the gel under makeup and over sunscreen. Use the gel until your scar turns pale and no longer changes color when pressure is applied and removed.

### **Hypertrophic Scars and Keloids**

People with brown or olive skin are more likely to have scars that are raised (*hypertrophic*) or continue to grow outside of the original scar area (*keloids*). Both of these conditions can be lessened by following the guidelines for scar care in this handout.

If hypertrophic or keloid scars do occur, it is best to treat them when they first appear. Later treatment may also be possible. Please ask your primary health care provider about this.

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