Oxford University Hospitals NHS Trust

Plastic Surgery Unit

Split skin graft

Information for patients
Information leaflet for patients with a split skin graft (SSG) to the leg

**Why a skin graft?**
You may have a skin wound as a result of surgery to remove a lesion caused by skin cancer, a severe skin infection, or from an injury or burn. If the area is small and the skin nearby is loose, the wound can be closed by bringing the edges together (direct closure).

If this is not possible, then the wound can be repaired with a skin graft.

**What is a skin graft?**
Skin grafting is a surgical procedure in which a shaving of healthy skin is completely removed from another part of the body (called the donor site) and used to cover the wound, where the lesion was present.

The graft heals by taking up a blood supply from the base of the wound thereby allowing the grafted skin to survive.

The main advantage of a skin graft is that it is a relatively simple procedure and can easily provide cover for larger wounds.

**Risks/Complications**

**The skin graft may not ‘take’. This may require more surgery.**
- Blood and fluid may build up under the SSG.
- There is also a risk of infection; this may lead to partial or complete loss of the SSG.
- Sometimes SSGs fail. It is important to take care of the SSG during the first two weeks to reduce the chance of it failing.
- Do not smoke. Smoking inhibits the microscopic growth of blood vessels slowing the process of taking up a blood supply.
- There may be raised scars and/or poor cosmetic appearance.

**What will my graft look like?**
Early on the graft will appear reddish / purple and indented compared to the surrounding skin. However the graft usually fades quite quickly and any indentation will often fill out to some extent over a period of
many months. So the initial appearance should not cause alarm. It can take up to 18 months for a scar to ‘mature’, usually leaving a pale, soft, flat and supple surface.

**When you go home**

Take it easy for two weeks, building up slowly into your ‘normal’ routine. Do not exert your grafted area. Depending on where your graft is, how big it is and what type of job you do you may need to take time off work, two weeks or more. Exercise that might stretch or injure the graft should be avoided for 3 – 4 weeks.

**After the surgery**

The graft may be stapled, stitched or glued in place; these techniques depend on the patient, the size of the graft and the area to which it is applied.

Do not disturb the dressing yourself. Please keep the dressings dry (unless you are advised otherwise).

You will have a padded dressing on the donor site. This stays in place until you are seen in the plastic surgery dressing clinic in five to fourteen days time.

The graft will then be redressed regularly until it heals. This time varies from patient to patient. It is usually about 2 weeks but it may take longer.

Depending on your individual circumstances you need to rest and elevate the graft area for between 2 and 10 days. This is very important for the healing of your skin graft.

Once at home you should continue to rest your leg. You may gradually increase your activity but should not stand still – either walk short distances or sit with your leg up on a stool.

**Donor site**

The donor site dressing is not usually changed for two weeks. It heals itself, as the skin graft is just a shaving of skin from that area (usually the thigh. Occasionally the donor site is stubborn about healing needing repeated dressings over many weeks.

You may need to take painkillers such as paracetamol at regular intervals, but do not exceed the stated dose of no more than 8 in 24 hours. The donor site often produces more discomfort than the grafted area.
**Long term care**

- Once healed use a moisturising cream such as E45, Nivea cream or Vaseline two or three times a day, on both the grafted site and the donor site for three months or longer if the area remains dry.

- Protect the grafted area and the donor site from direct exposure to sunlight. Keep it covered for the first year and then protect it with a sun block there-after.

- Ask your surgeon about camouflage make-up if you are concerned about the appearance of the graft.

- Expect skin discolouration at both the graft and the donor sites. This will gradually improve over the following 9 – 12 months.

**Contact the hospital if there is severe or throbbing pain, bleeding or unpleasant smelling discharge in either the grafted area or the donor site.**

If you have any questions or need any advice please call Plastic Surgery Dressing Clinic between 9am - 5pm, Monday to Friday on **01865 231173**.

Please leave a message and we will get back to you as soon as possible, the answer phone is checked twice a day.

In an emergency please contact your GP or attend the Emergency Department.

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If you need an interpreter or need a document in another language, large print, Braille or audio version, please call **01865 221473** or email **PALSJR@ouh.nhs.uk**