

## Polyethylene tube as an attachment to universal serial bus (USB) dermatoscope for preventing cross-infection

### Problem

The applications of dermatoscopy now include a range of parasitic infestations and infective conditions, such as bacterial, fungal and viral infections. The dermatoscope often comes in contact with infective lesions and could act as a carrier for nosocomial infections. Demonstration of the human papillomavirus (HPV) DNA on dermatoscope's lens and its ineffective removal by antiseptic cleansing wipes, raises concerns.<sup>1</sup> Chattopadhyay *et al.* demonstrated the presence of methicillin-resistant *Staphylococcus aureus* and *Bacillus sp.* on the contact dermatoscopes.<sup>2</sup> These possibilities raise medical, ethical and even legal concerns. Although the concern is more with the contact dermatoscopes, even the noncontact ones are not exempted from this possibility.<sup>3</sup> Various measures that are proposed in the literature are not applicable to a USB dermatoscope.<sup>4,5</sup> The disposable front cap provided with some contact dermatoscopes are not useful for USB dermatoscopes.

### Solution

We devised a simple, cost-effective innovation for use with USB dermatoscopes. Leucoplast adhesive tapes are commonly available in clinics and hospitals. The plastic tube which forms the core of these tapes [Figure 1a], was used as

a front attachment for the USB dermatoscope [Figure 1b]. It functions as a spacer between the skin and the device. Moreover, a single tube can be cut into 2–3 pieces. These tubes can be kept overnight in glutaraldehyde solution for sterility. The sterile tubes can be attached to the probe of the USB dermatoscope prior to performing dermatoscopy which ensures that the probe or the cover cap does not come in contact with the skin surface. Later, it can be discarded after use.

The distinct advantages offered by the polyethylene tube include easy availability and low cost. The circumference of such tubes is comparable to that of the front piece of USB dermatoscope; hence allowing a comfortable fit. At the same time, it does not compromise the image quality [Figures 2a and b]. Thus, the polyethylene tube which was once considered a hospital waste can be put to better use. Innovative modalities and ideas are a need of the hour to utilize dermatoscopes for a range of lesions and avoid any negligence on the part of the treating physician.

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Nil.



Figure 1a: Polyethylene plastic tube



Figure 1b: The tube attached to the probe of dermatoscope



**Figure 2a:** Filiform wart showing thrombosed vessels at the tips (Dinolite 413ZT, ×150)



**Figure 2b:** Larvae in the case of wound myiasis (Dinolite 413ZT, ×150)

**Conflicts of interest**

There are no conflicts of interest.

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