

Response by author

Sir,

I fully agree with the author of the letter titled 'Blog your clinical photos'.^[1] The latest generation of collaborative web-based tools - namely, wikis, blogs/photoblogs and podcasts/vodcasts - offer many unique and powerful information-sharing and collaboration features. They also have the added advantage of taking the technical skill out of these features, allowing users to focus on the information and collaborative tasks themselves, minus delivery obstacles.^[2-13]

Wikis, blogs/photoblogs and podcasts/vodcasts carry the potential of complementing, improving and adding new collaborative dimensions to the many existing online dermatology services like Map of Dermatology (<http://healthcybermap.org/dermap/>),^[14] the UK NLH Skin Disorders Specialist Library ([e 3](http://</p></div><div data-bbox=)

www.library.nhs.uk/skin),^[15] telederm.org (Open Access Teleconsultation in Dermatology - <http://www.telederm.org/> and <http://teledermatology-society.org/>),^[16] Virtual Grand Rounds in Dermatology (<http://www.vgrd.org/> - see their supplementary blog: <http://vgrd.blogspot.com/>) and Dr. Bell Eapen's Virtual Dermatologist (<http://www.gulfdoctor.net/vd.htm>), to name a few.

However, careful thinking is needed to find the best ways to use these emerging tools to boost our productivity, foster better 'communities of practice' and support our continuing professional development. Healthcare professionals and students with dermatology interests must be adequately involved in this process. Inspired by the successful Yahoo! 360 model,^[17] the resultant 'use scenarios' should also be designed to provide the 'binding glue' for the different technologies on offer (wikis, blogs/photoblogs and podcasts/vodcasts) and existing online dermatology services, integrating them synergistically into one coherent, wholesome, and unique user experience.

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Maged N. Kamel Boulos

Health Informatics, University of Plymouth, UK.

Address for correspondence: Maged N. Kamel Boulos,
Health Informatics, University of Plymouth, UK.
E-mail: mnkamelboulos@plymouth.ac.uk

Pseudo-tattoo dermatitis

Sir,

Skin painting (pseudo-tattooing) with henna, which is traditionally performed in Muslim and Hindu communities, is gaining widespread popularity nowadays, especially among the younger generation. We report one such case of contact dermatitis following use of black henna mixture. The reaction was associated with prior sensitization to p-phenylenediamine (PPD).

A 19-year-old medical student presented with an itchy erythematous vesicular eruption on the right upper arm of 3 days duration. He had had a temporary henna tattoo at this site 2 weeks back while on holiday in Goa. The tattoo had subsequently faded off to leave behind an erythematous eruption the shape of which corresponded exactly to the tattoo design [Figure 1].