

Assembling a customized toe separator for the management of interdigital dermatoses

Problem

The mainstay of treatment for interdigital infections is to keep the web spaces dry, which is achieved by keeping the toes separated.¹ However, this is particularly difficult in patients with obesity, arthritis, diabetes and other orthopedic problems. Some authors have suggested the role of a coiled wire loop as a toe-separator, but this is not always comfortable or user-friendly.² Toe separators are also available online; but their availability, higher cost and fixed size/shape is an issue.

Solution

We have tried to overcome this problem by making a customized toe separator at home or clinic, using a hot glue stick which is a common stationery item that is readily available. They are usually made of silicone and rubber which are inert, non-irritating and are least allergenic [Figure 1]. A small piece of stick was cut as per the required size and molded by pressing it on a hot iron (or any hot surface) to obtain flattened ends on both sides. A small piece of butter paper was placed in between

the glue stick and iron to avoid sticking [Figure 1]. This device acts as a toe separator. It can be further molded to get any desired shape so that it snugly fits in between the toes without causing discomfort [Figures 2 and 3]. Furthermore, the use of this device can be continuous or intermittent as per the patient's comfort. It can also be used along with loose-fitting footwear. We have used this device over a period of 4 months for many patients in our day-to-day practice. This tool is customizable, economical, comfortable, durable, re-usable, washable, easily available and does not require much expertise to assemble [Video 1].

Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent forms. In the form, the patients have given their consent for their images and other clinical information to be reported in the journal. The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity but anonymity cannot

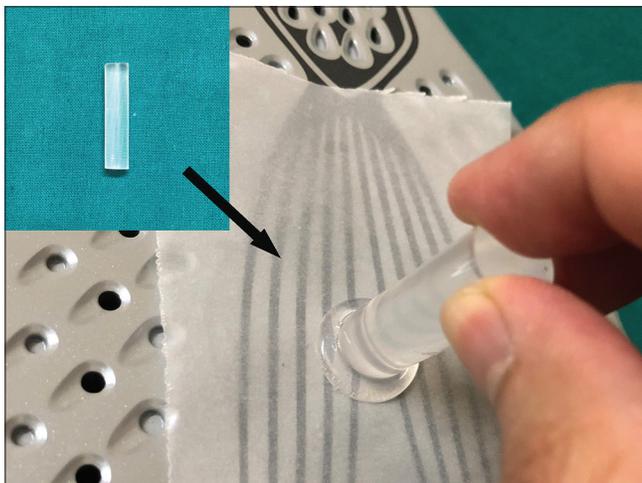


Figure 1: Small piece of hot glue stick being molded on a hot iron



Figure 2: Glue stick mould in use by a patient



Figure 3: Different molds prepared from a glue stick

be guaranteed.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

***Sanjeev Gupta, Ravi Shankar Jangra¹,
Saurabh Swaroop Gupta, Ajinkya Vinayak Gujrathi,
Sunita Gupta²***

Departments of Dermatology and ²Medicine, Maharishi Markandeshwar Institute of Medical Sciences and Research, MMDU, ¹Sun Skin Clinic, Ambala, Haryana, India

Correspondence: Dr. Sanjeev Gupta,
#B2, MM Medical College Residential Campus, MMDU, Mullana,
Ambala, Haryana, India.
E-mail: sanjeevguptadr@gmail.com

References

1. Janniger CK, Schwartz RA, Szepletowski JC, Reich A. Intertrigo and common secondary skin infections. *Am Fam Physician* 2005;72:833-8.
2. Vedamurthy M, Ashique KT, Moorthy A, Samuel S. An innovative approach for separating the toes to manage interdigital dermatoses. *J Am Acad Dermatol* 2016;75:e189-90.

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

Video available on: www.ijdv1.com

Access this article online

Quick Response Code:	Website: www.ijdv1.com
	DOI: 10.4103/ijdv1.IJDVL_780_19

How to cite this article: Gupta S, Jangra RS, Gupta SS, Gujrathi AV, Gupta S. Assembling a customized toe separator for the management of interdigital dermatoses. *Indian J Dermatol Venereol Leprol* 2020;86:750-1.

Received: September, 2019. **Accepted:** December, 2019.

© 2020 Indian Journal of Dermatology, Venereology and Leprology | Published by Wolters Kluwer - Medknow