

Innovations

Disposable syringe barrel splint for retaining dressing on lip

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Received : 06 October 2022

Accepted : 17 October 2022

Published : 29 October 2022

DOI

10.25259/CSDM_118_2022

Quick Response Code:



PROBLEM

Epidermal skin grafting is a common surgical procedure for treating lip vitiligo with better cosmetic results. However, retaining the graft over the lip is difficult, which is crucial for the clinical results. Moreover, the graft dressing and its retention are a surgical challenge on the movable lip.

SOLUTION

To combat the abovementioned issue, a customized disposable syringe barrel has been used for post-operative stabilization of the lip dressing and retention of the graft over the operated site. For this, a barrel with the ideal diameter (often a 5 mL syringe) is selected and cut on both sides to obtain an optimum length for the splint. After this, the barrel is slit longitudinally and about one-fourth to one-third part of the barrel is sliced out lengthwise to get a semi-circular (horse-shoe arched) splint [Figure 1a and b]. Then, this splint is applied over the lip for gripping and stabilizing the lip without exerting significant compression and discomfort [Figure 2a and b]. The barrel splint is applied for 5–7 days. If patients experience discomfort, the splint can

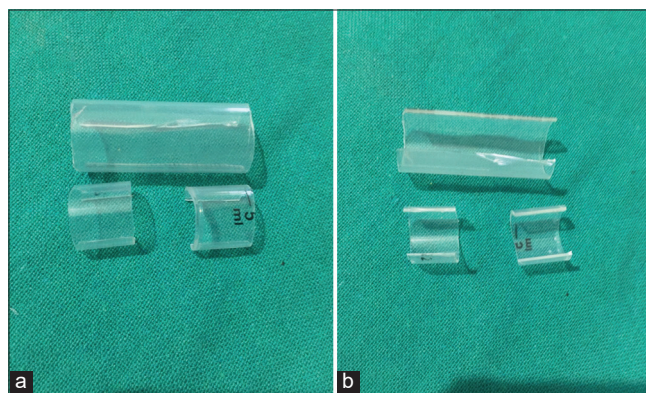


Figure 1: (a and b) Customized syringe barrel splints (large and small) for lip stabilization.

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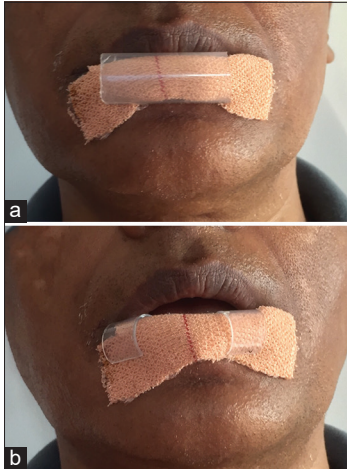


Figure 2: (a and b) The syringe barrel splints in place for retaining the graft and dressing over lip.

be removed for 5–10 min every 2–3 h. However, the barrel should remain in place during active lip movement, such

as eating or conversation. If some patients continue to have discomfort, we may assess the barrel mismatch with lip dressing and some areas of the barrel are sliced. This personalized splint is simple to use, inexpensive, readily available, and sterile. Sharp edges can be blunted and plastic splint can be moulded by heat for proper snug.

Declaration of patient consent

Patients' consent not required as patients' identity is not disclosed or compromised.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

How to cite this article: Mukhtar M. Disposable syringe barrel splint for retaining dressing on lip. *CosmoDerma* 2022;2:101.