

Innovations

Surgical pearl: A simplified technique for getting mini epidermal grafts

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PROBLEM

Epidermal grafts are useful for treating residual vitiligo lesions. The residual lesions are often small in size. With epidermal grafting over tiny lesions, the blister graft could be resized as needed to avoid graft and time loss. For resizing the graft, the paper sandwiched between petrolatum soaked/impregnated gauze has been used.^[1] However, obtaining easily marked surface of multiple mini epidermal grafts for identification and transfer is challenging job.

SOLUTION

All of these difficulties can be addressed with a simple technique for obtaining mini epidermal grafts. Following the harvestation of the epidermal graft (blister, ultrathin Thiersch's), the graft is transferred onto a sterilized micropore adhesive tape, with the dermal surface facing up on the tape.



Figure 1: (a-d) The harvested graft is cut into eight pieces to get mini epidermal grafts.

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This large epidermal graft is easily cut into eight or more pieces as per requirement [Figure 1a-d]. As a result, it reduces graft loss caused by over-grafting at the small recipient site. Instead of this tape, antiseptic Handyplast or Band-Aids can be used. The tape simplifies graft identification and its transfer using a hypodermic needle and tissue forceps rather than a glass slide. As a result, this simple technique may be used to create convenient, clearly recognized mini epidermal grafts for treating small residual vitiligo lesions.

Declaration of patient consent

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

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Conflicts of interest

There are no conflicts of interest.

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1. Ashique KT, Srinivas CR. Resizing blister roof grafts for vitiligo surgery. *J Am Acad Dermatol* 2014;71:e39-40.

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