

# Mobile Teledermatology Update 4 of different Clinical Cases Presentation

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## Abstract

**Background:** Teledermatology involves a qualified professional clinical photographer taking a series of digital photographs of a patient's skin lesion. The photographs are then sent to a dermatologist for remote assessment to see if the patient needs to come into hospital for further treatment.

**Objective:** To study the pattern of cutaneous clinical cases sent through social media Patients and Methods males and female's infants and children's and adults patients presented and sent photos through WhatsApp with different clinical skin lesions

**Results:** The clinical data and the information about the patients showed they had different skin diseases.

**Conclusion:** Now a day's social media solved many things in internet and the far is near. All Those neam from AL-LAH. Alhamdolellah Spotting diagnosis and the treatment and follow up performed free of charge.

**Keywords:** Mobile, Teledermatology, Yemen, Clinical Cases, Social Media



**Case 1:** Acrocyanosis of feet fingers due to H Pylori treatment  
oral metronidazole 250 mg and amoxille 500mg



**Case 2:** Impetigo contagious treatment oral antibiotic and topical antibiotic



**Case 3:** Dyshidrotic eczema treatment bepanthine ointment and topical steroid with salicylic acid



**Case 4:** Tenia nigra treatment topical antifungal



**Case 5:** Tenia circinata treatment topical antifungal



**Case 6:** Acne comedons treatment avoid squeezing it and frequent washing with soap.



**Case 7:** Herpes zoster treatment topical xylocaine gel and oral and topical antibiotic



**Case 8:** Planter hyperkeratosis treatment topical bepanthine and topical steroid with salicylic acid



**Case 9:** Tenia capitis treatment topical antifungal



**Case 10:** Chronic eczema treatment topical steroid



**Case 11:** Multiple boils due to diabetes mellitus treatment blood sugar control and topical and oral antibiotic.

## Comment

Tele dermatology is a subspecialty in the medical field of dermatology and probably one of the most common applications of telemedicine and e-health [1].

In tele dermatology, telecommunication technologies are used to exchange medical information (concerning skin conditions and tumors of the skin) over a distance using audio, visual, and data communication [2-10].

Applications comprise health care management such as diagnoses, consultation, and treatment as well as (continuous) education. The dermatologists Perednia and Brown were the first to coin the term "tele dermatology" in 1995. In a scientific publication, they described the value of a tele dermatologic service in a rural area underserved by dermatologist's Mobile telemedicine is a system in which at least one participant (the person seeking advice or the doctor, for instance) uses wireless or mobile equipment i.e. mobile phones, handheld devices), in contrast to conventional stationary telemedicine platforms. Travelers who develop skin lesions as well as doctors who are on the move in hospital/non-hospital area can benefit from this new development in tele dermatology [11-15].

To facilitate access to medical advice and enable individuals to play a more active role in managing their own health status, mobile tele dermatology seems to be especially suited for patient filtering or triage. (i.e. referral based on the severity and character of their skin condition) [16-20].

Another possible practical application is for follow-up of individuals with chronic skin conditions. However, currently available studies show a high rate of missed skin cancers including melanoma, and there is not enough robust data to recommend this method of diagnosis and treatment. Suitability of cases Not all cases are suitable for tele dermatology [21-24].

The type of cases. suited for tele dermatology is a topic, which requires more studies. Some studies have observed that eczema and follicular lesions were diagnosed with relatively more certainty, while in some other studies it was seen that diagnoses were made with more certainty in cases like viral warts, herpes zoster, acne vulgaris, irritant dermatitis, vitiligo, and superficial bacterial and fungal infections. Implemented projects by country of Yemen.

## References

1. ATA Tele dermatology SIG. (2007). American Telemedicine Association. Archived from the original on 2 February.
2. Wootton, R. (2017). Realtime Telemedicine. In Wootton R, Craig J, Patterson V (eds.). Introduction to Telemedicine (Second ed.). CRC Press, 88.
3. Wurm, E. M., Hofmann-Wellenhof, R., Wurm, R., Soyer, H. P. (2008). Telemedicine and teledermatology: Past, present and future. Journal of the German Society of Dermatology, 6(2), 106-112.
4. Burg, G., Soyer, H. P., Chimenti, S. (2005). Teledermatology. In Frisch P, Burgdorf W (eds.). EDF White Book, Skin Diseases in Europe. Berlin, 130-133.
5. Perednia, D. A., Brown, N. A. (1995). Teledermatology: one application of telemedicine. Bulletin of the Medical Library Association, 83(1), 42-47.
6. Chuchu Naomi., Dinnes Jacqueline., Takwoingi Yemisi., Matin Rubeta, N., Bayliss Susan, E., Davenport Clare., ... & Walter Fiona, M. (2018). Cochrane Skin Group (ed.). Teledermatology for diagnosing skin cancer in adults". Cochrane Database of Systematic Reviews, 2018(12).
7. Telederm.org. (2024). eDermConsult.
8. Binder, B., Hofmann-Wellenhof, R., Salmhofer, W., Okcu, A., Kerl, H., & Soyer, H. P. (2007). Teledermatological monitoring of leg ulcers in cooperation with home care nurses. Archives of dermatology, 143(12), 1511-1514.
9. Ford, A. R., Gibbons, C. M., Torres, J., Kornmehl, H. A., Singh, S., Young, P. M., ... & Armstrong, A. W. (2019). Access to dermatological care with an innovative online model for psoriasis management: results from a randomized controlled trial. Telemedicine and e-Health, 25(7), 619-627.
10. IDD International Dermoscopy Diploma. (2011). Medizinische Universität Graz. Archived from the original on 13 January 2011.
11. DermNet N Z. (2024). New Zealand Dermatological Society.
12. Massone, C., Soyer, H. P., Lozzi, G. P., Di Stefani, A., Leinweber, B., Gabler, G., ... & Kerl, H. (2007). Feasibility and diagnostic agreement in teledermatopathology using a virtual slide system. Human pathology, 38(4), 546-554.
13. Bauer, J., Leinweber, B., Metzler, G., Blum, A., Hofmann-Wellenhof, R., Leitz, N., ... & Garbe, C. (2006). Correlation with digital dermoscopic images can help dermatopathologists to diagnose equivocal skin tumours. British Journal of Dermatology, 155(3), 546-551.
14. Handyscope. (2020). FotoFinder Systems GmbH. Archived from the original on 10 April 2020. Retrieved 27 November 2018.
15. Snoswell, C., Finnane, A., Janda, M., Soyer, H. P., Whitty, J. A. (2016). Cost-effectiveness of store-and-forward teledermatology: a systematic review. JAMA dermatology, 152(6), 702-708.
16. Chuchu, N., Takwoingi, Y., Dinnes, J., Matin, R. N., Bassett, O., Moreau, J. F., ... & Cochrane Skin Group. (1996). Smartphone applications for triaging adults with skin lesions that are suspicious for melanoma. Cochrane Database of Systematic Reviews, 2018(12).
17. Kaliyadan, F., Venkitakrishnan, S. (2009). Teledermatology: clinical case profiles and practical issues. Indian Journal of Dermatology, Venereology and Leprology, 75, 32.
18. Schofield, J. G. D. W., Grindlay, D., Williams, H. (2009). Skin conditions in the UK: a health care needs assessment.
19. Nicholson, D. (2011). The Operating Framework for the NHS in England 2011/12.
20. Skin cancer responds to around 30% of all malignant tumors in the Country. (2019). Sociedade Brasileira de Medicina Tropical (in Portuguese).
21. von Wangenheim, A., Nunes, D. H. (2019). Creating a web infrastructure for the support of clinical protocols and clinical management: an example in teledermatology. Telemedicine and e-Health, 25(9), 781-790.
22. Giavina Bianchi, M., Santos, A., Cordioli, E. (2021). Dermatologists' perceptions on the utility and limitations of teledermatology after examining 55,000 lesions. Journal of telemedicine and telecare, 27(3), 166-173.

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23. Snoswell, C. L., Caffery, L. J., Whitty, J. A., Soyer, H. P., Gordon, L. G. (2018). Cost-effectiveness of skin cancer referral and consultation using teledermoscopy in Australia. *JAMA dermatology*, 154(6), 694-700.
24. Snoswell, C. L., Whitty, J. A., Caffery, L. J., Finnane, A., Soyer, H. P. (2019). What do Australian dermatologists expect to be paid for store-and-forward teledermoscopy? A preliminary investigation. *Journal of Telemedicine and Telecare*, 25(7), 438-444.