RETRONYCHIA

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A normal nail plate is pushed back and upwards; 
A new nail plate (or more) grows underneath; 
Paronychia ensues.
CLINICAL APPEARANCE

PATIENT CHARACTERISTICS

Female $^{1-5}$ ($\approx$ 70-80%); 15-50 y.o. (mean age $\approx$ 30)$^{1-4}$

Precipitating factors:$^{1-4}$
- Trauma (acute injury, shoewear, sports) ---> unawareness
- Systemic illness; Pregnancy and postpartum
- Compartmental syndrome
- Unknown

Unsuccessful courses of antibiotics and/or antifungals$^{1-5}$

SIGNs: 3-4

All: Chronic paronychia (months to years)
Nail overcurvature, proximal elevation (2-4 nail plate lamellae sandwich) 4
Periungual or PNF granuloma and exsudate (≈ 30%) 4, 5

All(?): Onycholysis 6

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HIGH-RESOLUTION ULTRASOUND (high frequency transducers >15MHz)

Clinical diagnosis

Pre-surgical confirmation? (MRI?)

Differential? US signs of other diseases...

RETRONYCHIA is onychocryptosis:

Mechanism: Proximal shedding, retention/regression of a nail into nail pocket;
[Complication of onychomadesis?]

Clinical: ≥ 1 new nail lamellae; chronic paronychia +/- granulation tissue;

Cause: trauma!

Diagnosis: may be confirmed by US criteria ---> more studies, please!

Treatment: avulsion ---> “chosen treatment-of-choice”;
+ taping(?) ; other(?) ;
+ adjunctive/preventive measures