

Onychotermiology (Typical Clinical or Onychoscopic sign)

Onychomadesis following hand foot and mouth disease

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CASE DETAILS

An 11-year-old boy presented with an altered appearance of fingernails. Examination showed proximal splitting of the nail plate from nail bed along with shedding of the nails of the index and middle fingers of the left hand [Figure 1]. Similar changes were seen in the middle finger nail of the right hand as well. There was a history of an episode of hand, foot and mouth disease (HFMD) 5 weeks ago. A diagnosis of onychomadesis was made, and the parents were informed regarding the self-limiting nature of the nail changes.

DESCRIPTION

Onychomadesis refers to the separation of the nail plate from the proximal nail fold due to a number of causes including viral infections (HFMD), autoimmune diseases, drugs (anti-cancer drugs, antibiotics such as azithromycin, penicillins, systemic retinoids and anti-epileptic drugs), systemic diseases (immunodeficiency syndromes, Kawasaki disease), and trauma. However, many cases are idiopathic. Fingernails are found to be more commonly involved. The exact pathomechanism is not known; however, it is postulated that both onychomadesis and

Beau's lines belong to the same spectrum of onychodystrophies developing as sequelae to the temporary arrest of the growth of nail matrix, with onychomadesis belonging to the severe end of the spectrum. In general, treatment is not needed with spontaneous resolution within 1–2 months is the rule.

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Figure 1: Clinical image showing onychomadesis involving the index and middle finger of the (a) left hand and (b) middle finger of the right hand.

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