

## CHRONIC PARONYCHIA

### What are the aims of this leaflet?

This leaflet has been written to help you understand more about chronic paronychia. It will tell you what it is, what causes it, what can be done about it, and where you can find out more about it.

### What is chronic paronychia?

Paronychia is a common infection of the skin around the fingernails (the nail folds). 'Acute paronychia' is the term used for short-lived episodes; 'chronic paronychia' is used if it lasts for more than 6 weeks. The condition can last for months or even years.

### What causes chronic paronychia?

Chronic paronychia is not caught from someone else. The bacteria that cause it are known as 'opportunistic pathogens'. This means they cause infection only when conditions are right, such as when you have an open wound. In the case of chronic paronychia, this is often a split in a cuticle, which normally protects and seals off the potential space between the nail and the nail fold.

A swab from an infected nail fold will often grow a mixture of bacteria and yeasts in the laboratory, rather than just a single type. Some of these can discolour the nail.

Women get chronic paronychia three times as often as men. It is particularly common in those who:

- have their hands constantly in water and detergents (without protective gloves), or bakers who work with flour
- have a poor circulation, and therefore cold hands and feet
- push back their cuticles
- have diabetes

### Is chronic paronychia hereditary?

No.

### What are the symptoms of chronic paronychia?

It causes repeated episodes of tenderness and swelling of affected nail folds, which may be one or several. The nails may also have a discoloured or ridged appearance, which can be cosmetically unacceptable for some people.

### What does chronic paronychia look like?

It starts in the nail fold at the base of one nail, but often spreads up beside the nail. All nails in the hands can be affected, as predisposing conditions such as hand-wetting are common to all the nails.

The main changes are:

- areas of swelling at the base or sides of one or more nails. The skin becomes red, shiny and tender, and the nail fold separates away from the nail.
- loss of the cuticle in inflamed areas.
- pus, - white, yellow or even greenish - can be squeezed out in small amounts from inflamed areas.
- the nail itself may grow out ridged and become discoloured. This can be apparent for many months after the paronychia has cleared. as the nail slowly grows out.
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### **How is chronic paronychia diagnosed?**

The red swollen nail folds of chronic paronychia give it a characteristic look so your doctor will be able to make the diagnosis without laboratory tests. It should not be confused with ringworm (tinea) infection, in which the nail itself, but not the nail fold, will be affected.

Other conditions such as psoriasis and lichen planus can also affect the nails and cause ridging and discolouration.

Your GP may wish to:

- check your urine for sugar to make sure you are not diabetic.
- take a swab from an inflamed nail fold to see which germs are present (for example bacteria or the yeast that causes thrush) as this may influence treatment.

### **Can chronic paronychia be cured?**

Yes - but remember that just as it starts slowly, it also clears slowly.

### **How can chronic paronychia be treated?**

To work well, treatment has to alter the things that started it; this is not always easy. It may take as long as six months for the cuticle to reform, and until it does, the problem may recur.

Acute paronychia needs antibiotic tablets by mouth. If forming pus, it may need surgical drainage.

Chronic paronychia:

- Usually an antibacterial and/or antifungal cream or lotion improves the condition within a few weeks. Sometimes a steroid cream in addition speeds up improvement.
- If the above is not successful then antibiotic or antifungal tablets might be needed.
- Surgery is not usually needed, but sometimes can help clear the condition if medical treatment fails.

- Predisposing factors such as frequent hand-wetting must be addressed to help the nails improve.
- Underlying conditions such as diabetes and poor circulation must also be treated to help improve paronychia.

### **What can I do?**

- You should keep your hands as warm and dry as possible; you will not get better until you do this.
- Wear gloves for any wet tasks, including shampooing and washing up.
- Avoid biting your nails, manicuring your nail folds, and pushing back the cuticles.
- Do not use nail varnish until the condition has been treated.
- Occasionally a change of occupation is worth thinking about.
- Do not apply false nails until the condition is resolved.

### **Where can I get more information?**

*Web links to detailed leaflets:*

<http://www.dermnetz.org/fungal/paronychia.html>