

PARONYCHIA Synonyms: Whitlo

Paronychia is a simple inflammation of the tissues about a nail. The intensity of the process varies from a superficial inflammation with slight redness and scarcely perceptible swelling to an intensely painful and tender, angry phlegmonous tumefaction accompanied by suppuration or ulceration, and often producing a bulbous deformity of the terminal phalanx. When the onset is acute the inflammation may remain confined to the neighborhood of the nail or it may spread to other regions like a dermatitis repens. On the fingers the process more often begins insidiously, involving possibly only a small part of the nail region, as one lateral fold, and so persisting indefinitely, or extending slowly from day to day; or after an acute onset the condition may become chronic and very sluggish. Rarely are all the fingers involved at the same time. The nutrition of the nail is impaired and it becomes more or less deformed in consequence, usually rough and thickened. The disease is occasionally idiopathic. More often it is associated with eczema of the hand, or impetigo contagiosa in children. Its most common occurrence is among women, especially those who

Whitlow; Run-around; Ingrowing toe-nail.

have their hands a great deal in water. On the feet the disease is usually acute and caused by improper paring of the nails on the lateral edges, and by the pressure of tight-fitting shoes. A specific paronychia is sometimes met with in the secondary stage of syphilis and is not to be distinguished from simple paronychia except by the presence of other syphilitic manifestations. TREATMENT: In acute cases continuous wet dressings of liquor alumini acetatis may be used, together with free drainage of abscesses, when there is deep suppuration, either by incision or removal of the nail, as may be necessary. In the subacute and chronic cases frequent applications of three to ten per cent salicylic acid salve and occasional paintings under the nail fold and in the furrows with two to five per cent silver nitrate solution are beneficial. The best method of preventing recurring attacks on the feet is to elevate the nail by packing beneath it with borated lint until its lateral edges have grown out beyond the distal ends of the nail furrows and thereafter to prohibit the paring of the nail except transversely on its distal edge, and enjoin the wearing of proper shoes.

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