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TRICHOPHYTOSIS UNGUIUM

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Synonyms: *Onychomycosis trichophytina*; *Tinea trichophytina unguium*; Ringworm of the nails.

When the ringworm fungus attacks the nail, which it does comparatively rarely, the lateral margins seem to offer the least resistance to the invasion. The edge of the nail which is first affected loses its luster and transparency, becomes thickened, lamellar, brittle and raised from the nail bed by the accumulation of crumbly, grayish scales of epithelial debris upon its under surface. The disease may remain limited to one portion of the nail, though generally it spreads very slowly across the distal border and then upward toward the lunula, so that in time the whole nail may become deformed, thick, furrowed, opaque and friable. It is unusual to find all the nails affected. In most instances only three or four are diseased, and the history is of consecutive involvement and gradual extension. Untreated the malady persists for years, with no tendency to spontaneous recovery. **DIAGNOSIS:** From the clinical aspect of the nails themselves it is often impossible to distinguish trichophytosis unguium from the *dystrophic disturbances* which sometimes accompany such inflammatory diseases as eczema, psoriasis, pityriasis rubra pilaris,

dermatitis exfoliativa, etc. In these conditions, however, other symptoms are present as a rule to serve as a guide. If all the nails are involved the affection is probably not ringworm, but the only method of making a positive diagnosis is by a microscopic examination. Scrapings of the nails should be soaked in liquor potassii hydroxidi and examined under a magnification of four or five hundred diameters. Exceptionally the soaking must be continued for many hours before the ringworm spores become plainly visible. *Favus* of the nail cannot be distinguished clinically from ringworm unless lesions are present on other parts of the body, but the distinction is of no importance as far as treatment is concerned. **TREATMENT:** The nail should be pared closely and scraped as thin as possible with a sharp instrument or the edge of a piece of glass. Painting the nail with liquor potassae softens its substance and renders the scraping more easy. Then the nail should be covered with absorbent cotton wet with Lugol's solution (Liq. iodi compositus) diluted with two parts of water, and the whole covered with a rubber cot. The iodine inhibits the development of the fungus and the diseased nail is gradually replaced by the normal growth.