

INGROWING TOENAILS



What causes them?

There are many genetic factors that can make you prone to ingrowing toenails, including your posture (the way you stand), your gait (the way you walk) and any foot deformity such as a bunion, hammer toes or excessive pronation of the feet (when your foot rolls inward excessively). Your nails may also have a natural tendency to splay or curl out instead of growing straight.

One of the most common causes is not cutting your toenails properly, such as cutting nails too low in order to relieve the pressure and discomfort of an involuted nail.

Tight footwear, hosiery and socks can also push your toe flesh onto the nail so that it pierces the skin. Also, if you sweat excessively or don't rotate your footwear, this makes the skin moist and weak so that it is easily penetrated by the nail. If you have brittle nails with sharp edges or are in the habit of breaking off bits of nail that are sticking out, you are also more likely to get an ingrowing toenail.

Less common is a fungal infection or in some cases particular types of medication, e.g. isotretinoin.

What are the treatments?

Treatment will depend largely on the severity of your condition. Local Anaesthetic will be used as required:

- For the most basic painful and irritable ingrowing toenail, the offending spike of nail will be removed and covered with an antiseptic dressing.
- For involuted nails, part of the nail that is curling into the flesh is removed and then the edges of the nail are filed to a smooth surface.
- For any bleeding or discharge from an infection, or even excessive healing flesh (hypergranulation tissue) around the nail, antibiotics will be prescribed to manage the infection as well as having the offending spike removed.
- For those particularly prone to ingrowing toenails from underlying problems such as poor gait, a partial nail avulsion (PNA) may be recommended along with finding a more permanent solution to the underlying condition. This procedure is done under a local anaesthetic where part of the nail is removed (including the root), leaving a permanently narrower nail. In some cases a total nail avulsion (TNA) may be performed, where the entire nail plate and root are removed. In either case, the chemical phenol is used to cauterise the nail and prevent it regrowing. This is over 95% successful.
- If a PNA or TNA is ineffective or inappropriate there are sharp resection procedures, such as the Winograd procedure, which can be employed. These involve sharply removing the offending side of nail and matrix, and suturing the wound closed. Sutures will normally stay in place for 10-14 days. The success rate for this procedure is over 90%.