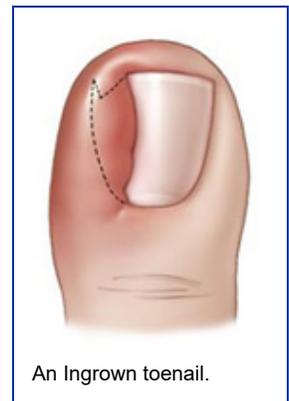


Ingrown Toenail

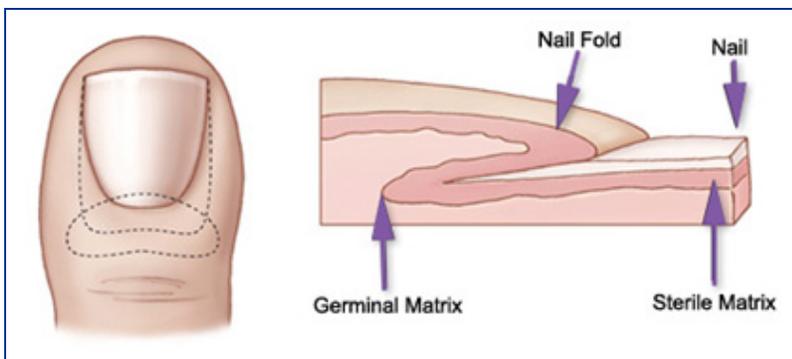
If you trim your toenails too short, particularly on the sides of your big toes, you may set the stage for an ingrown toenail. Like many people, when you trim your toenails, you may taper the corners so that the nail curves with the shape of your toe. But this technique may encourage your toenail to grow into the skin of your toe. The sides of the nail curl down and dig into your skin. An ingrown toenail may also happen if you wear shoes that are too tight or too short.



Symptoms

When you first have an ingrown toenail, it may be hard, swollen and tender. Later, it may get red and infected, and feel very sore. Ingrown toenails are a common, painful condition—particularly among teenagers. Any of your toenails can become ingrown, but the problem more often affects the big toe. An ingrown nail occurs when the skin on one or both sides of a nail grows over the edges of the nail, or when the nail itself grows into the skin. Redness, pain and swelling at the corner of the nail may result and infection may soon follow. Sometimes a small amount of pus can be seen draining from the area.

Ingrown nails may develop for many reasons. Some cases are congenital—the nail is just too large for the toe. Trauma, such as stubbing the toe or having the toe stepped on, may also cause an ingrown nail. However, the most common cause is tight shoe wear or improper grooming and trimming of the nail.



Treatment

Nonsurgical Treatment

Ingrown toenails should be treated as soon as they are recognized. If they are recognized early (before infection sets in), home care may prevent the need for further treatment:

- Soak the foot in warm water 3-4 times daily.
- Keep the foot dry during the rest of the day.
- Wear comfortable shoes with adequate room for the toes. Consider wearing sandals until the condition clears up.
- You may take ibuprofen or acetaminophen for pain relief.
- If there is no improvement in 2-3 days, or if the condition worsens, call your doctor.

You may need to gently lift the edge of the ingrown toenail from its embedded position and insert some cotton or waxed dental floss between the nail and your skin. Change this packing every day.

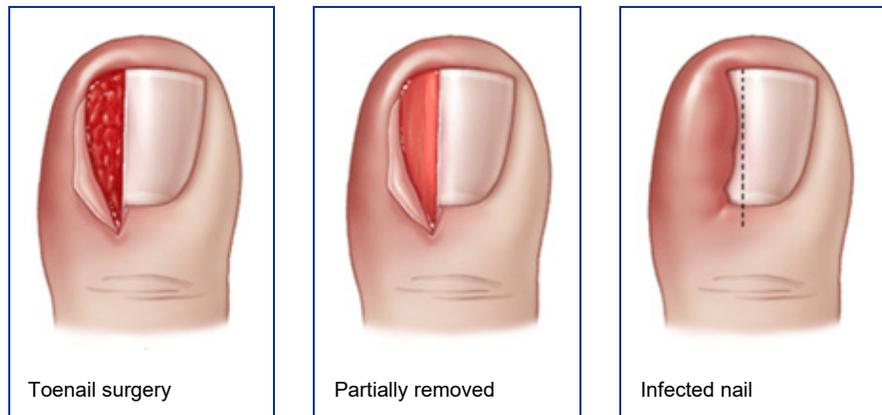
Surgical Treatment

If excessive inflammation, swelling, pain and discharge are present, the toenail is probably infected and should be treated by a physician (see left image below). You may need to take oral antibiotics and the nail may need to be partially or completely removed (see middle image below). The doctor can surgically remove a portion of the nail, a portion of the underlying nail bed, some of the adjacent soft tissues and even a part of the growth center (see right image below).

Surgery is effective in eliminating the nail edge from growing inward and cutting into the fleshy folds as the toenail grows forward. Permanent removal of the nail may be advised for children with chronic, recurrent infected ingrown toenails.

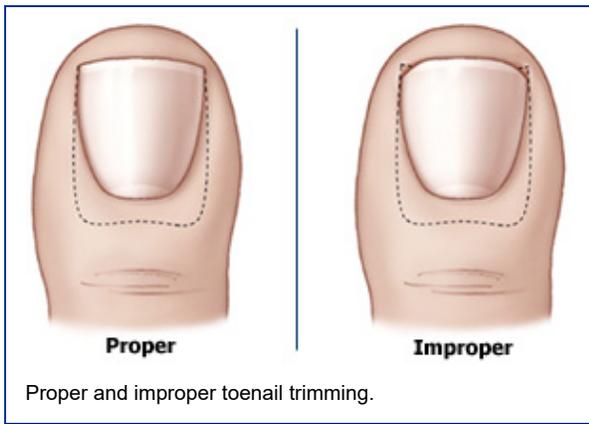
If you are in a lot of pain and/or the infection keeps coming back, your doctor may remove part of your ingrown toenail (partial nail

avulsion). Your toe is injected with an anesthetic and your doctor uses scissors to cut away the ingrown part of the toenail, taking care not to disturb the nail bed. An exposed nail bed may be very painful. Removing your whole ingrown toenail (complete nail plate avulsion) increases the likelihood your toenail will come back deformed. It may take 3-4 months for your nail to regrow.



Risk Factors

Unless the problem is congenital, the best way to prevent ingrown toenails is to protect the feet from trauma and to wear shoes and hosiery (socks) with adequate room for the toes. Nails should be cut straight across with a clean, sharp nail trimmer without tapering or rounding the corners. Trim the nails no shorter than the edge of the toe. Keep the feet clean and dry at all times.



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