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Onychomadesis

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A two-year-old girl was admitted with deformity of her finger and toenails. She had deformation and Beau lines on the fourth and fifth finger nails of the right hand and the fourth finger nails of the left hand. Similar changes were also observed in some of the toenails. She had a grouped vesicular rash on her foot about two months ago. Complete blood count was within normal limits and no other laboratory tests were performed. Considering the possibility of herpes simplex infection or herpes zoster, oral acyclovir treatment was given. Her rashes completely resolved and nail changes were noticed. The patient had no other systemic pathologic findings. Nail changes were interpreted as onychomadesis. It was thought that the patient had an atypical hand foot and mouth disease and nail changes developed subsequently. The nail changes were gradually resolved without any problems.

Hand foot and mouth disease is an infectious disease caused by enteroviruses. Although it typically involves the named areas, the disease also causes atypical rashes that make clinical diagnosis difficult. Onychomadesis is defined as the separation of the proximal nail plate from the nail matrix and nail bed. Enteroviruses are thought to cause inflammation in the nail bed, temporarily arrest the growth of the nail matrix and consequently cause the development of onychomadesis. Onychomadesis occurs one to two months following hand foot and mouth disease and resolves spontaneously.



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