

Ingrown Toe Nails [IGTNs]

1. What is an ingrown toe nail [IGTNs]?

Ingrown toenail results when a **nail grows into the toe flesh** and it is one of the more common foot problems. Usually it is the **big toe**, however, any toe can be affected and sometimes both feet get the problem.

2. What symptoms do they cause?

- They can be **very painful** and is aggravated by wearing shoes, particularly those with a narrow front. May be sensitive to any pressure, even the weight of bed cloths.
- Some ingrown toe nails are **chronic**, with repeated episodes of pain and infection. In most of them a **granuloma** [redundant soft tissue] develops along the nail margin.
- **Infection** is quite common, with redness and swelling. There may be drainage of pus or a watery discharge tinged with blood.



3. What is the cause of IGTNs?

- Improper trimming of toe nails;
- Tight fitting shoes that compress the toes together;
- Hose or socks that is too tight;
- Abnormally shaped nail plate;
- Trauma to the nail or the toe, even minor, especially if they are repeated;
- Improper motion of the joints of the feet;
- Sometimes heredity.

4. What can I do to help?

- You should **cut the toe nails straight across**, leaving them slightly longer than the edge of the toe. Be especially careful at the corners avoiding tears at the nails as the will rip down into the corner where the nail meets the skin.
- Wear **well fitted**, moderately to low heel **shoes**.
- If discomfort develops try **soaking the foot** in a basin of warm water 2-3 times a day.

- Apply **antiseptic** [i.e. iodine] below the nail edge and along its sides. If infection occurs, you should ask for professional attention as antibiotics and special soaks will be needed.
- **If you are diabetic or have poor arterial circulation you should never attempt to treat IGTNs at home.**

5. What about treatment in chronic or infected IGTNs?

Surgery is often needed to ease the pain and remove part or the entire offending nail; occasionally it has to be performed to treat the infection. In the majority of the cases only a small portion of the nail may be removed. If the entire nail is affected or there is severe nail deformity, the nail plate and matrix [the cells that grow the nail] may be completely removed. **With surgery re-growth will be prevented in 85-90% of the cases.**

6. How is surgery performed?

Toenail surgery is usually carried out under general anaesthetic but can be done under local anaesthetic. It is usually performed as a day case. **Day case surgery** means that after surgery, when you recover from anaesthesia [3-4 hours if general, 1-2 hours after local anaesthesia] your escort will take you home.

A. Coming into hospital

- You will be received in the ward by the **nurse** who will note your personal details and ask about any other conditions you suffer from. You will be asked to sign a **consent form** that the procedure has been explained to you and you agree to go ahead.

B. The operation

- The procedure site will be washed. Sterile drapes will be placed over you to guard against infection and local anaesthetic will be administered on the base of the toe. It will last for two hours or more.
- An incision is made on the affected side removing about one quarter of the nail. [**wedge excision**]. The nail bed is then removed along with any enlarged tissue or granuloma that has developed. After removal, the nail root, bed and matrix are **surgically removed**.
- **Complete removal** of the nail, the nail plate and matrix is performed only rarely, and is preferred in fungal infections.
- One stitch is placed that needs to be removed after 14 days. The surgeon will apply a dressing to your foot after the operation and when you recover you will be ready to go home.

7. What about care after surgery?

- After 6 hours the local anaesthetic will stop working and you will start experiencing pain. Initially pain killers should be taken regularly. You should **not remove the dressings for the first 48 hours** following surgery. Some bleeding may be seen immediately after surgery, but it is rarely significant.
- You should **elevate your leg for the first 24 hours**; this helps to reduce pain and swelling.
- Keep the dressing on for 5 to 7 days. Remove the dressing if soiled or wet and replace with new dressing. The wound care clinic can be helpful and an appointment can be made.
- Antibiotics are not required, unless the toe becomes swollen, tender and red [inflamed].
- Most patients do not restrict their normal activities at all following partial toenail removal.



8. How will my nail look after surgery?

After healing, following partial nail removal, the nail will be normal in appearance, somewhat smaller. The incurvated nail border is gone, leaving a toenail unlikely to grow again.

After surgery for complete removal, the body generates a hardened skin covering over the sensitive nail bed. When this covering has developed fully, normal activities may be undertaken. Women can also use nail polish in this area.



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