Melanoma of the Nail Unit

Melanoma Ungueal

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A 75-year-old woman presented with an ulcerated nail bed in the first toenail of the right foot, which evolved for two years. Initially self-diagnosed as onychomycosis, she self-medicated with topical antifungals. Progressive worsening led her to seek care from her family physician.

An extensive ulceration replaced the nail bed with almost complete nail plate destruction without inflammatory signs. A pigmented patch with poorly defined edges covered the proximal, lateral, and distal nail folds. She was referred to Dermatology and a histological diagnosis of invasive ungual malignant melanoma was made. This rare disease has a slow growth rate, and its diagnosis is often delayed as it is commonly misdiagnosed as an infection, wart or chronic ulceration.1 Treatment delay is associated with a poor prognosis, and, as in this case, amputation of the digit is necessary.2

Physicians should be aware of broad (> 3 mm), single digit, densely black bands on the nails, particularly if accompanied by nail plate destruction and ulceration.3

AUTHOR CONTRIBUTIONS

LCL: Study design, data collection, literature search, writing and critical review of the manuscript.
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JPM: Literature search, writing and critical review of the manuscript.
AL: Data collection, writing and critical review of the manuscript.

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Figure 1 – Ulceration of the nail bed and destruction of the nail plate, accompanied by pigmentation of the perinychium (Hutchinson’s sign)
PROTECTION OF HUMANS AND ANIMALS
The authors declare that the procedures were followed according to the regulations established by the Clinical Research and Ethics Committee and to the Helsinki Declaration of the World Medical Association updated in 2013.

DATA CONFIDENTIALITY
The authors declare having followed the protocols in use at their working center regarding patients’ data publication.

PATIENT CONSENT
Obtained.

COMPETING INTERESTS
The authors have declared that no competing interests exist.

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REFERENCES