Surgical technique for management of symptomatic digital clubbing

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What is This?
Surgical technique for management of symptomatic digital clubbing

Dear Sir,

A 30-year-old male presented with digital clubbing in both hands. He had been diagnosed with hereditary clubbing (Sarkar 2012; Spicknall 2005). His main complaint was pain at the fingertip on direct impact activities (especially when using a keyboard) due to his nails growing into the hypertrophic pulp distally. In addition, he had recurrent infections at the fingertip. He had no problems on the lateral margins of his nails. He had tried a variety of ways of clipping his finger nails in addition to allowing the nails to grow over the pulp. However, due to the pulp hypertrophy, the ingrowing nail would invariably recur (Figure 1). He was willing to consider any surgical intervention other than nail ablation.

Under general anaesthesia the nail plate was carefully removed. A fish-mouth incision was made at the junction of hyponychium and volar digital pulp. The digital pulp was exposed along with the distal phalanx (Figure 2). The pulp was debulked and the distal phalanx was trimmed. An elliptical segment of excessive skin was excised and the skin was sutured (Figure 3).

Six months post-operatively, the patient was able use his fingertips without pain for activities requiring direct impact, and there were no further problems with infection at the fingertip (Figure 4).

Figure 1. Digital clubbing with nail ingrowth into pulp (arrow indicating site of pain).

Figure 2. Fish-mouth incision exposing distal phalanx (arrow indicates the distal phalanx).

Figure 3. Removal of excessive skin following debulking of hypertrophic pulp and trimming of distal phalanx and closure.

Figure 4.
We recommend our technique for patients with pain or recurrent infection from ingrowing nails due to digital clubbing in the hands. This surgical procedure may also be useful in patients with digital hypertrophy due to congenital, vascular, or neoplastic conditions presenting with problems with ingrowing nails.

**Conflict of interests**
None declared.

**Patient consent**
The patient consented to the clinical pictures and publication of this case report.

**References**

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