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Paronychia and its homeopathic management

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Abstract

Paronychia is defined as the inflammation of the folds of tissue around the nails of a finger or a toe. Women are 3 times more prone to men as they are more exposed to water and irritants. Paronychia can be classified as acute paronychia or chronic paronychia. The main reason for development of acute Paronychia is direct or indirect trauma to the cuticle or nail folds whereas frequent exposure to the water, chemical and irritants are responsible for chronic Paronychia. Homeopathy as a system of medicine can play a major role in controlling and curing Paronychia, if the history is recorded and physical examination is done appropriately can minimize the need of surgery as well.

Keywords: Paronychia, trauma, nail folds, homeopathy, surgery

Introduction

Paronychia is among the commonest infection of the hand and foot. The term *para* means “around” and *onyx* means “nail”, thus it involves the lateral and proximal part of the nails of the finger and toe folds, which includes the skin and tissue that borders the side and root of the nail. This may occur due to trauma, manipulation and sometimes spontaneously. When the protective barrier between the nail and nail fold is disrupted it results in Paronychia. Mostly the Paronychia involves in single nail but can occur in many nails at a time due to drug induced conditions [2, 3].

Epidemiology

Paronychia is more in women compare to men; female to male ratio is 3:1. Majority of the patients are manual labour and people with occupation where the hands and feet are submerged in water for a long period of time (e.g. Dishwasher, washerwomen etc). Highest risk of infection is found among middle aged female [4].

Etiology and Classification

According to the clinical presentation, Paronychia can be classified as below:

- 1. Acute Paronychia:** Acute Paronychia most commonly results from habits of biting nails, sucking finger, aggressive manicuring, a hang nail or penetrating injury with or without retained foreign body. This usually last for less than six weeks, condition is painful and purulent. The commonest infectious agents is staphylococcus aureus, followed by streptococci and pseudomonas organism.
- 2. Chronic Paronychia:** Chronic Paronychia looks similar to the acute Paronychia clinically, but the reason is multifactorial, which includes trauma due to mechanical and chemical reasons and also sometimes infections like *candida species* which is fungal infection and comprise of around 95%. People at risk of developing chronic Paronychia includes those who are repeatedly exposed to water containing irritants like dishwasher, bartenders, housekeepers and swimmer, as well as certain medicine and immune suppressed persons (diabetes, HIV or malignancy).

Pathophysiology

The pathophysiology of the paronychia stands with the disruption of the protective layer or barrier between the nails and nail folds that is cuticle. Other predisposing factors like injuries or trauma (like pedicure and manicure of the finger nails), infection (like bacteria, fungal and viral), structural deformities (ingrowing nails) and other inflammatory disease (for example Psoriasis) are also responsible. These factors gives access for the organism to enter the moist nail crevices, which leads to colonization of the affected area.

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In case of acute Paronychia, *staphylococcus aureus*, *streptococci* and *pseudomonas* are responsible for the infection whereas *candida albicans* are responsible for the chronic Paronychia in majority of the cases [5].

Diagnosis

The diagnosis of paronychia is purely clinical. No specific laboratory tests and investigations are available for the diagnosis of paronychia as such. To precede a case of paronychia a clear detailed history including the history of recent injury, infection, structural deformity and inflammation should be taken. Past history including medical and surgical history should be noted down, this should also include any prolonged debilitating conditions like HIV/AIDS or diabetes. The patient's living style, occupation, working environment helps in the diagnosis of chronic paronychia. Then the role of physical examination is important, where the affected part is seen swollen, erythematous and tender especially on the lateral nail folds. The area of fluctuance is present in case of underlying abscess. Which should be drained out to hasten the healing of paronychia and avoidance of complication. The chronic paronychia present with swelling but fluctuance is rare, it appears discolored and moist.

Miasmatic background

According to Hahnemann's theory of chronic diseases and bacteriology Micro-organisms (Bacteria) as cause of individual diseases are not the whole unconditioned causes, they are reduced in rank to equality with constitution, heredity, predisposition and environment. Since bacteria is only one of the many causes of diseases. In chronic diseases constitutional symptoms are more marked whereas in acute cases structural and functional changes of tissues over shadow constitutional symptoms [6].

From the above information, we can understand that the diseases are not only caused by the micro-organisms, but diseases depend on the susceptibility, heredity, predisposition and environment.

So Paronychia can be caused because of different causes and covers all the three Miasm i.e., Acute paronychia caused due to staphylococcus, streptococci etc, Hang nails, nail biting falls under PSORA. When the infection progresses with accumulation of pus i.e. abscess formation it falls under SYCOTIC Miasm. Chronic Paronychia i.e. usually in immune compromised (HIV), Diabetes etc, Diseases lasting for long time with structural derangements of nail ridges and nail bed falls under SYPHILIS [7].

Management and Treatment

Patient should keep their hand and foot dry, clean and warm. Recommendation includes wearing of gloves to avoid any contact with water, chemical and irritants. Avoid nail-biting, manicuring nail fold, using nail varnish or false nails until complete recovery is achieved. The blood sugar level should be kept under control in case of Diabetes Mellitus [3].

Modern system of Medicine usually treats through antibiotics and antifungal. In case of large collection of pus, a surgical intervention like Incision and Drainage under proper aseptic and antiseptic measure is recommended. Chronic and recurrent Paronychia is a threat for the modern system, but homeopathy can play a main role. Homeopathy treatment is holistic in nature, which means that

homeopathic treatment not only heals pathologically but considers the person as whole. The Homeopathic medicines are selected after a complete and proper individualization and proper case analysis. Along with this the miasmatic tendency (predisposition/susceptibility) is also taken into account for the treatment especially in recurrent or difficult cases. Homeopathy not only proves its efficacy by controlling, curing the condition, but avoid the need of surgical intervention in many cases of Paronychia.

Homeopathic Therapeutics related to Paronychia [8,9,10].

- 1. Belladonna:** Belladonna is recommended in the initial stage of the inflammation before the pus settles. The affected finger nail folds are red, tender and swollen. There is alternate redness and paleness of the skin.
- 2. Silicea:** Silicea is helpful for paronychia with pus, infection and sharp pains in nails. It is given especially if white spots are visible on the nails. It is also very good remedy for ingrowing toe nails. Patient has icy cold and sweaty feet.
- 3. Fluoric Acid:** Fluoric acid is a remedy for Paronychia specially for old ages. There is inflammation of the finger joints. Sensation of a sphincter under the nail. Nails crumble. The nails grow too rapidly and crumbles with fungal infection.
- 4. Graphites:** Graphites is given when patient has paronychia with nail crack. Toe nails are crippled. The nails are brittle and break easily. It also treats when patient has deformity in the nails which are painful, sore, thick and crippled.
- 5. Hepar Sulphuris:** Toe nails are painful on slight pressure. Abscess with suppurative prickling pain. Unhealthy skin: every little injury suppurates. The condition is chronic and recurring in nature.
- 6. Myristica Sebifera:** A remedy with great antiseptic powers. Traumatic infections, pain in the fingernails with swelling of the phalanges. Often prevents the use of surgeon's knife.
- 7. Tarentula Cubensis:** Tarentula Cubensis is a toxemic medicine and for septic conditions. It is adapted to the most severe type of inflammation and pain. Especially suited for senile ulcers.

Rubrics related to Paronychia [11, 12, 13, 14].

Phatak's Repertory

Nails – painful – Caus, Grap, Merc, Nit-ac, Sil, Sul

William Boericke's Materia Medica with Repertory

- Locomotor System – Fingers – pains, at root of nails – *All-c*, *Berb*, *Bism*, *Myris*
- Skin – Whitlow – felon, paronychia – *All-c*, *Am-c*, *Anthraci*, *Bufo*, *Calc-f*, *Calc-s*, *Calen*, *Crot-h*, *Dios*, *Fl-ac*, *Hep*, *Hyper*, *Led*, *Merc*, *Myris*, *Nat-s*, *Ol-myr*, *Phos*, *Sil*, *Tarent-c*

Frederik Schroyen's Synthesis Repertory

- Extremities – Abscess – Fingers – *androc*, *bufo*, *Fl-ac*, *Hep*, *hydrog*, *Lach*, *Mang*
- Extremities – Abscess – Fingers – Nail, around – *hydrog*
- Extremities – Inflammation – Nails – *Calen*, *kali-c*, *moni*

Robin Murphy's Homeopathic Medical Repertory

- Hands – Inflammation – Fingers – nails, around – *nat-*

mur, nat-s, ph-ac, stict

- Hands – Nails, fingernails – Inflammation – AM-C, ANTHR, APIS, DIOS, FL-AC, HEP, NIT-AC, SIL, TARENT-C

JT Kent's Repertory of Homoeopathic Materia Medica

- Extremities – Abscess – Fingers – *Fl-ac, hep, lach, mang*
- Extremities – Inflammation- Fingers – nails – kali-c

Prognosis

Prognosis of Paronychia is good. The acute paronychia heals within a few days by proper treatment and chance of reappearing is low in healthy patients. Whereas the chronic paronychia may take some time and can last for months. The recurrence is seen in predisposed patients.

Complications

Appropriate treatment and timely diagnosis of a case of acute paronychia is important as it can be complicated and may cause severe infection to the hand and foot by spreading to underlying tendons. Chronic paronychia can be complicated with nail dystrophy. Chronic paronychia associated with nails, plates distortion, discoloration of nails and prone to break easily.

Conclusion

Homeopathy offers excellent treatment for Paronychia, both acute and chronic. The treatment not only depends on the physical appearance but on the totality of the symptoms considering maintain and predisposing factor too. The above therapeutic medicine and the rubrics are used frequently in treatment of Paronychia. The proper and timely treatment not only cures the case but also reduce the possibility of recurrence, thus avoiding the need of surgery and further complications.

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