

INGROWN TOENAIL



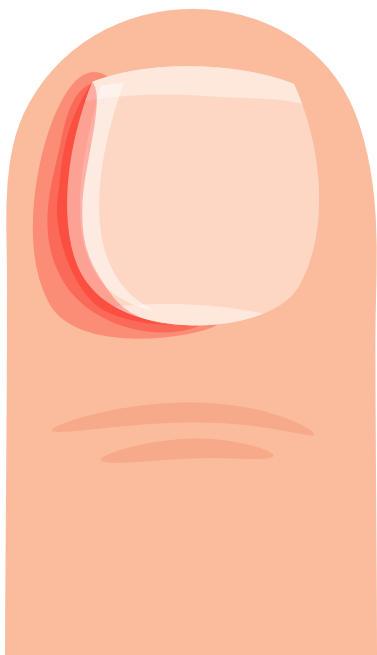
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WHAT IS AN INGROWN TOENAIL?

An ingrown toenail occurs when the edge or corner of a toenail grows into the surrounding skin instead of over it. This condition most often affects the big toe, but it can occur on any toe. It typically develops gradually and can range from mild discomfort to severe pain, affecting daily activities. If left untreated, it may lead to infection, abscess formation, or, in people with diabetes or poor circulation, more serious complications.



Schematic of an ingrown toenail

RISK FACTORS FOR INGROWN TOENAILS

- **Genetics:** Some toes are more prone to ingrown toenails due to the anatomy they were born with
- **Teenagers and young adults:** Rapid nail growth and increased sweating make the skin softer, allowing nails to dig in more easily.
- **Athletes:** Running, kicking, and sudden foot pressure can lead to repeated trauma or poor nail-cutting habits.
- **People who wear tight footwear:** Shoes or socks that crowd the toes increase pressure on the nails.
- **Those with curved or thick nails:** A natural nail shape that curves downward or thickens with age raises the likelihood of ingrown edges.
- **Individuals with poor foot hygiene:** Not drying feet properly or cutting nails incorrectly increases risk.
- **People with diabetes or circulation problems:** Reduced sensation or healing ability heightens the risk of infection and delayed recovery.
- **People with previous injuries:** Past trauma or surgery on the toe can alter nail growth direction.

SYMPTOMS OF INGROWN TOENAILS

- **Pain or tenderness:** Especially when pressure is applied to the affected toe or while wearing shoes.
- **Redness and swelling:** The skin around the nail edge becomes inflamed.
- **Warmth around the nail:** This indicates the body's inflammatory response.
- **Drainage of fluid or pus:** Suggests infection or abscess formation.
- **Overgrowth of skin around the nail:** Known as granulation tissue, this may bleed easily.
- **Difficulty walking or wearing shoes:** Pain can limit movement and activity.

INGROWN TOENAIL

DIAGNOSIS

Diagnosis is usually made on clinical examination. Xrays are rarely needed but may be requested to rule out underlying deformity and bone infection.

TREATMENT

Treatment depends on the severity of the ingrown toenail and whether infection is present. The goal is to relieve pain, control infection, and prevent recurrence. Most ingrown toenails can be managed without surgery or with podiatry.

Conservative (Non-surgical) Treatments

These are suitable for mild to moderate cases.

- Warm saltwater soaks: Soaking the foot in warm, salty water for 10–15 minutes, several times a day, can reduce swelling and soften the skin.
- Proper nail care: Gently lifting the ingrown edge using cotton or dental floss to separate it from the skin may help the nail grow correctly.
- Antibiotic creams: Topical or oral antibiotics are prescribed if an infection is present.
- Footwear changes: Wearing open-toe or wide-fitting shoes prevents further pressure.
- Pain relief: Over-the-counter pain medication such as paracetamol or ibuprofen can ease discomfort.
- Podiatrist intervention: A podiatrist may trim or reshape the nail, clean the wound, and apply antiseptic dressings.

Surgical Treatments

These are considered for severe, recurrent, or infected cases.

- Partial Nail Avulsion (PNA): The most common procedure where the ingrown edge of the nail is removed under local anaesthetic. A chemical (phenol) or sodium hydroxide) may be applied to prevent regrowth of the problematic section.
- Total Nail Avulsion (TNA): The entire nail is removed if the condition affects the full width of the nail or is recurrent.
- Matrixectomy: The nail matrix (growth centre) is partially or completely destroyed to prevent regrowth.
- Wedge Resection: A surgical removal of the affected nail edge and surrounding inflamed tissue to allow normal healing.

For more information, see **Ingrown Toenail Surgery**

USEFUL WEBSITES

<https://www.healthdirect.gov.au/ingrown-toenails>