Partial nail avulsion: What is best practice?

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Background & Aim: A Partial Nail Avulsion (PNA) is a frequently used surgical technique for the management of onychocryptosis. Onychocryptosis, or ingrown nail, can be managed conservatively however surgical management is superior. A PNA can have the intent to be temporary or permanent depending on the chemical addition to the nail bed. The method to undertaking a PNA is thought to differ between medical and podiatry practitioners. This literature review collates the current evidence on the optimal technique to undertake a PNA procedure and to determine differences in approach.

Method: An extensive systematic literature review was performed to determine the optimal technique on undertaking a PNA procedure. Articles were categorized into PNA procedure and chemical matricectomy categories. Each category had the intent of determining recurrence, pain to patient and aesthetic appearance.

Results: PNA procedures are most effective using chemical matricectomy. Phenol, tricholoroacetic acid, bichloracetic acid and sodium hydroxide were compared with promising results. There is no literature on the PNA procedure clinical variations that are observed between medical and podiatry practitioners.

Conclusion: A PNA with chemical matricectomy is a successful and evidence based surgical procedure of onychocryptosis. Further research into the number of medical and podiatry practitioners who adhere to the PNA evidence based procedure and use of chemical matricectomy would be of interest.

Biography
Sarah Flynn has completed her Doctor of Medicine (MD) from the University of Notre Dame, Sydney, Australia. She has obtained her Masters in Podiatric Practice and Bachelors in Exercise Science. She is currently a Medical Intern in Australia and undertaking multiple research projects with a dermatology focus.

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