

Ingrown Toenails and Surgery – Dr Sarah Watts



An ingrowing toenail occurs when the toenail edge starts to dig into the skin groove beside the nail. The nail may have a curvature, that causes it to bend around and press into your skin. Sometimes a small nail spike can cause the pressure.

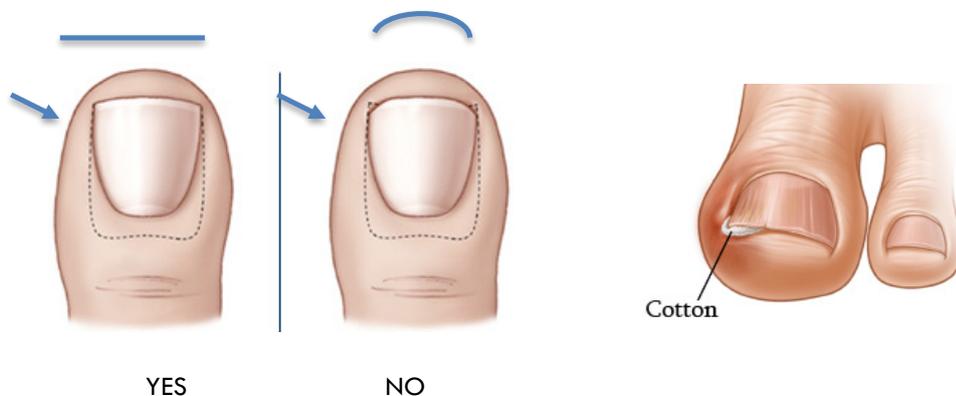
Some people are predisposed to ingrown nails, due to some minor deformities of the nail or toe. It can be precipitated by wearing very tight or narrow shoes, trauma or stubbing the toe. Correct toenail care is important in preventing the onset.

The skin may begin to grow over the corner of the nail. Sometimes the region can become infected. Infection may spread throughout the toe or into the foot. Pus may also discharge from the edge of the nail. This usually settles with simple measures such as antibiotics and proper nail care. Sometimes, it is a recurring problem.

Non-surgical treatment

If ingrown toenails are recognized early, some simple home care measures may prevent the need for further treatment.

***Diabetics and patients who have neuropathy, or other chronic foot problems need to be extremely careful with their foot and toenail care, and should NOT self-manage. They should be treated regularly by a doctor, or podiatrist.**



- Correct cutting of toenails – nails cut straight across, square corners, not tapered
- Toenails kept slightly longer rather than too short
- Warm water foot soaks, a few times a day
- Keep the foot dry and clean at other times.
- Wear wide breathe-able and comfortable shoes and socks with adequate room for the toes.
- Consider wearing thongs or sandals until the condition clears up.
- You may take Ibuprofen or plain Panadol, as able, for pain relief.
- Some people are able to gently lift the corner of the ingrown toenail from its embedded position and insert a small piece of cotton wool between the nail and the skin. This cotton wool should be changed daily. It may be too painful or deep for this to occur. Do not force this, and seek medical advice if there is a concern.
- If there is no improvement in 2-3 days, or if the condition worsens, contact your GP for an appointment.

If you have tried simple measures, and it is not getting better over time, surgery may be recommended.

SURGERY

The surgery is to try and prevent the ingrown toenail from occurring again. It has a high success rate (85-90%), but the ingrowing toenail can still recur in some patients.

Some people can have ingrowing on the inside side (medial), the outside side (lateral) or both sides of the toenail. The doctor will make sure the correct area/s is/are marked beforehand. The procedure occurs in the operating theatre. A local or general anaesthetic may be used, or a combination of both. The operation is almost always done as a day case.

The toenail is first removed – don't worry – you won't feel this. A small sliver of tissue in the growing part of the nail pocket is carefully removed, on the affected side, to stop it growing again. Some of the nail groove can also be removed to make it shallower. Sometimes a suture in the corner of the nail fold is required. Some antibiotic ointment is applied. A protective sticker dressing, and a bandage is applied to protect your toe.

POST OPERATIVELY

You can walk on the foot straight away, but an open toed shoe is better to keep pressure off the toe and the surgical site. (eg post op shoe, reef sandal, slide sandal). Keep the foot elevated as much as possible for the first week. Expect some pain to begin once you get home, as the local anaesthetic wears off. Simple panadol is usually all that is required for pain relief. The outer bandage can be removed 2-3 days after the operation. The underlying sticker dressing of the toe should remain. It is not uncommon to have a little bit of old blood stain the inner dressing, so don't worry too much if you can see this.

Further Appointments - You will be seen in Dr Watts rooms 10-14 days after your operation. The dressings will be removed, and the toe inspected. If there is a stitch, it will be removed. Don't worry if the dressings feel stuck, as it can be soaked off. By this appointment, the toe should be healed enough to accommodate a comfortable loose shoe, eg loose jogger and sock, or slipper.

The toe is able to return to the shower after this first appointment, if the healing is complete. The pain should start to be diminished by this stage. Normal footwear can start to be introduced after this point, as tolerated.

The toenail should take 3 to 4 months to fully regrow. After surgery, the toenail usually grows back slightly narrower than it used to be. This is the goal of the surgery. The deep groove will be usually be replaced by healing scar tissue, so the chance of ingrowing is less than it used to be.