

# FOOT NOTES

THE NEWSLETTER FOR SPRINGFIELD PODIATRY AND ACCURATE FOOT & DIABETIC CARE

April, 2022 Edition

## TOENAILS:

Many of you come to us with toenail issues, and we see the whole gambit, from fungal infections to ingrown nails to acute and chronic trauma of the nails. So this topic bears discussion as we enter the springtime. While some nail abnormalities may be due to such conditions as psoriasis, here are some of the most common nail problems we see.

**Fungal nails (Onychomycosis):** This is a very common infection of the toenails. We all have fungus and bacteria living on our skin regardless of how well we clean ourselves. Generally, this does not cause a problem, but fungus on the skin (called dermatophytes) will take advantage of an opportunity. Trauma to the nail, whether acute (stubbing the toe or dropping an object on the nail) or chronic (constant pressure from shoes) can cause the nail plate to separate from the nail bed, breaking the microscopic seal between the two. The skin fungus can then penetrate under the nail and cause an infection. As you may expect, those with chronic illnesses or poor circulation are more prone to these and other infections, but even healthy people contract nail infections. The fungus will then eat the keratin (nail protein) and leave dead nail debris, leading to a thick, yellow/brown, loose, crumbling nail...yuck! In severe cases or when a patient is otherwise medically compromised, this can affect a person's quality of life and put them at risk for other complications. While this is the same family of fungi that cause athlete's foot, the fungus under the nail is so deeply embedded under the nail that it is difficult for most topical medications to penetrate effectively enough to kill the fungus. That's where we come in.

We may send a sample of your nail to the lab to verify the fungal infection and determine the type. Treatment often consists of debriding (cutting and mechanically thinning with a power bur) the nail to remove as much of the dead nail and fungal debris as possible as well as to better expose the fungus. Prescription topical medications, such as Jublia and Kerydin, are generally very effective at eliminating the fungal infection. We also carry in our office Formula-7 and Tolcynen topical antifungal medications that are much more effective than the over-the-counter solutions. The Tolcynen also contains nail softeners and conditioners to improve the overall health of the nails. Class 4 laser therapy can be implemented in our office to target and kill the fungal cells while sparing your healthy tissue. This involves three painless treatments, each one month apart. And finally, there are oral medications, such as Lamisil (terbinafine) and Sporonox that are generally safe and very effective at eradicating the fungal infection as they travel through the bloodstream and into the nail bed and nail root where the fungus thrives.

**Thick nails:** Not all thick nails are due to fungus. Some are due to chronic microtrauma to the nail that causes the nails to thicken over time in the same way that a callus forms from constant irritation of the skin. This can lead to pain and discoloration of the nails. Filing and thinning of the nails along with use of a topical nail softener (keratolytic) can reduce the discomfort often felt in shoes.

**Ingrown Nails:** This painful condition occurs in people of all ages and is usually due to an excessive curvature along the side of the nail. The nails curve for genetic reasons and not due to our shoes or activities, although these may aggravate the pain. When the nails curve along the sides, they can literally grow into the skin causing sharp pain. Patients often state that it feels like a piece of glass in the skin. With the nail piercing the skin, the adjacent skin fold may become red and swollen. The bacteria on the skin can enter the area and produce a localized bacterial infection in the form of an abscess and/or cellulitis. This condition is often extremely painful. The area may bleed or drain clear fluid or pus.

When ingrown nails occur, do NOT try to cut the nail back yourself. This can lead to the creation of a small spike of nail that makes the condition worse. Instead, soak the toe in warm water and Epsom salts (1 Tablespoon of Epsom salt to 1 pint of water) for 10-15 minutes twice daily then apply antibiotic ointment (Neosporin, Bacitracin, etc.). Inserting a small, rolled up piece of cotton along the tip of the nail border may prevent the nail from growing into the skin. If these measures fail, call us ASAP to treat the ingrown nail. We can carefully cut back and remove the ingrown nail in the office. If the condition is severe or recurring, we may perform a partial nail avulsion whereby we remove the entire ingrown nail border (~ 1/8" width) to below the cuticle then remove the nail root only along the side. This permanently eliminates the ingrown nail border while preserving the majority of the nail plate. A non-surgical option is the OnyFix ingrown nail correction system. This involves applying a thin strip of a specialized compound to the base of the nail that will cure and harden. As the nail gradually grows out, the OnyFix will contract to straighten the curved nail border without pain, surgery or needles. This is a great option for those who do not want surgery or cannot have surgery. It is also useful for those who had the permanent nail border removal in the past and the remaining nail has curved to become ingrown again. Rather than remove more nail, this will preserve the nail plate and permanently resolve the ingrown nail.

So, if you are having any nail issues, feel free to visit either office to discuss the problem and find a solution that keeps your nails beautiful and pain free.

## **ANNOUNCEMENT**

Our annual Shoe Drive started in November and ended on March 31, 2022. We would like to thank you so much for the overwhelming response from so many of you! This was by far our most successful shoe drive ever. The new and gently used shoes, boots, sandals and slippers you have generously donated will go to people in need at a homeless shelter. We and they greatly appreciate your kindness and support!

## **PERSONALLY SPEAKING**

Our Medical Assistant, Lisa, works primarily in the Drexel Hill office but helps out in West Chester as well. She has been a Podiatric MA for over 25 years. A native of Chester County, Lisa is currently engaged and hopes to be married within the next year. Her hobbies include home decorating, gardening, fishing and listening to country music. While not an avid television watcher, her favorite show is Yellowstone, where she visited two summers ago and hopes to return soon. Lisa enjoys traveling and looks forward to visiting many states in her retirement. (Not too soon, though!)

## **MYTH BUSTERS**

Toenail fungus is very contagious. Not true! As mentioned above, nail fungus is deeply embedded in the nail, and the live, active fungus is generally close to the nail base, so it does not spread easily. Additionally, there has to be some type of disruption to the bond between the nail and nail bed for the fungus to penetrate under the nail. These factors make it very difficult for the toenail fungus to spread from one person to another.

## **FUN FACTS**

Each foot takes 1.5 times your body weight when you walk and up to 5 times your body weight when you run.

## **WHAT'S NEW**

Some of you have used the Tolcylen Antifungal Nail Solution for your fungal toenails, and now we have Tolcylen Therapeutic Foot Soaks. These soaks are

formulated to augment skin and nail fungal treatments as they cleanse the skin and nails, moisturize dry skin, soften and exfoliate skin, eliminate foot odors, soothe irritated skin and rejuvenate sore feet. Ask us about these amazing soaks at your next visit!

## **QUOTES**

“Failure is not the opposite of success. It is part of success.” – Unknown

## **PUNNY STUFF**

I recently listened to a new local band called “Duvet”. It’s a cover band.

## **PUZZLE:**

Call today for your foot health evaluation!

In Drexel Hill, call 484-459-5954

(springfieldpodiatry@springpod.comcastbiz.net)

In West Chester, call 610-436-5883

(accpodiatry@gmail.com)

Or visit us at [www.drsiegerman.com](http://www.drsiegerman.com)

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