

"MY NAIL LOST ITS BED"- A CASE OF SPLIT THICKNESS TOE NAIL BED GRAFT FO LARGE NAIL BED DEFECT

Selvakumar Murthy¹, Mastura Hassim¹, Denny Clare¹

¹Hospital Miri

Introduction: Fingertip injury has been commonly associated with nail bed injury and fracture of the distal phalanx. Acute accidental injury could cause laceration of the nail bed or large area defect. Inadequate coverage of the nail bed may result in nonadherent nail leading to irregular nail. The use of thin split-thickness sterile matrix graft from the great toe for immediate replacement of nail bed improves the outcome of the nail look and provide proper adherent. Here we are reporting a case of large nail bed defect resulted from a dog bite which was treated with toe nail bed graft.

Discussion: 40 year old man, presented to casualty with bleeding and pain over his left thumb after being bitten by his a dog. Examination showed loss of nail bed over his left thumb approximately fifty-percent, with complete avulsion and loss of the nail plate. Distal phalanx was exposed, no fracture noted. Patient was admitted and started on IV antibiotic and daily irrigation of the wound bed. After 3 days course of IV antibiotics, split thickness toe nail bed graft done over the left thumb, with aluminium foil insertion over the eponychium. Daily dressing was done and eventually aluminium foil removed after 2 weeks. Upon follow up noted the graft uptake was satisfactory which with even and good smooth nail growth.

Conclusion: Many ways of reconstruction had been proposed, however, thin split thickness toe nail bed graft provides feasible technique that could be used in a clinical settings with limited resources such as at district hospital levels. Few advantage has been noted in this case, where the length of the digit is preserved, minimal trauma at the donor site and a straight-forward post operative wound management