ACQUIRED LEUKONYCHIA PARTIAL OF THE FINGERNAILS

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Received Date: 24 October 2019; Accepted Date: 15 November 2019; Published Date: 18 November 2019.

INTRODUCTION

Leukonychia is the most common of ungual discoloration. Leukonychia partialis is characterized by partial whitening of the nail plate. It is usually inherited or associated with systemic disease. We report a case of leukonychia partialis affecting 10 finger nails associated with chronic renal failure.

CASE REPORT

We report the case of a 62-year old patient with a 3-months history of renal failure and 1 month history of hyperuricemia treated with allopurinol. The patient presented to the Department of Dermatology for management of DRESS syndrome. She presented also a white discoloration affecting all 10 finger nails. The discoloration had been present 2 months ago. The examination of all fingernails showed partial whitening respecting the lunula with normal nailplate surface and thickness (Figure 1). Leukonychia is defined by the diffuse white discolouration of the nail plate and may be caused by nail plate abnormalities (true leukonychia and pseudoleukonychia) or by nail bed abnormalities (apparent leukonychia).
True leukonychia can be a benign isolated finding or may rarely be associated with other disorders.

![Image of hands with leukonychia]

**FIGURE 1**

**PARTIAL (LEUKONYCHIA PARTIALIS) WHITENING OF 10 FINGERNAILS.**

True leukonychia has been classified into four main types depending on the morphology of the white discoloration: leukonychia totalis, leukonychia partialis, leukonychia striata, and leukonychia punctata. Leuconychia can be acquired or congenita (Clayton et al., 2012). Acquired forms are most commonly associated with fungal infections or traumatisme, renal (Tosti et al., 2006) or hepatic disease, Hailey–Hailey disease, after organ or bone-marrow transplantation, in cases of graft-versus-host disease, and after chemotherapy. The most frequent onychopathy observed in chronic renal failure is half-and-half nail (Lindsay nail) (Cohen et al., 2018), absence of lunula, splinter haemorrhages and less frequently brittle nails (Salem et al., 2008).

**REFERENCES**


