RADIUM IN THE TREATMENT OF SUBUNGUAL VERRUCAE

SAMUEL AYRES, JR., M.D.

Assistant Professor of Dermatology, College of Medical Evangelists

LOS ANGELES

The strikingly satisfactory results obtained by the use of radium in the eradication of warts growing under the finger-nail seem to justify the reporting of two recent cases which have come under my observation. Although the method is doubtless familiar to many dermatologists and radium therapists, it has not found its way into the textbooks and has not received the recognition to which it is entitled.

REPORT OF CASES

CASE 1.—N. S., a woman, unmarried, aged 65, had been troubled with the condition for eight years. The onset and development were gradual but the lesion had remained practically stationary for several years, sometimes becoming acutely painful and interfering with household activities. There was no history of trauma as an exciting cause.

The lesion consisted of a deeply situated, longitudinal, brownish-black discoloration, beginning about midway between the root and the tip of the right thumb-nail, increasing slightly in width toward the tip, and appearing under the distal edge of the nail as a large pinhead size, brown, verrucous growth, which was tender on manipulation.

The nail was pared down over the lesion as closely as possible without causing pain. The normal tissue was protected by lead foil. A square, half-strength applicator, containing 5.5 mg. of radium element was applied, with only paper screening, for twenty minutes. Two subsequent exposures of forty and thirty-five minutes, respectively, were given at two-week intervals, making a total of ninety-five minutes. There was no unusual discomfort at any time, and the greatest amount of reaction consisted only of a mild erythema and scaling. Two months after the last treatment, not a trace of the lesion could be seen.

CASE 2.—E. F., a woman, aged 26, unmarried, a nurse in training, complained of a lesion under her thumb-nail which at times was so tender and painful that it interfered with her work, especially the making of beds. It had begun three months previously, with a gradual onset and with no history of a preceding trauma. The patient's mother had had a similar condition a year and a half ago, which after persisting six months, was corrected by operation. The removal was attended by considerable pain, but the lesion did not recur. The lesion was under the nail of the right middle finger, and had developed after the nail had been turned back accidentally. Mother and daughter used different manicure sets.

The lesion was located under the edge of the right thumb-nail, at about the middle. It was about the size of a small pea, was of the same color as the surrounding skin, and was distinctly verrucous on its free border. It extended only 3 or 4 mm. beneath the nail. This subungual portion showed a sharply rounded border. The lesion was tender to the touch.

The same procedures as described in the previous case were employed, except that only one exposure of seventy-five minutes was given. No increased pain or ulceration occurred. One month later the patient reported that the lesion was entirely gone, and the nail appeared perfectly normal.

COMMENT

Removal of subungual warts by means of surgery, fulguration, or cauterization is usually very painful because of the rich sensory nerve supply to the nail bed. Because of their location, lesions thus treated can easily become infected unless aseptic dressings are maintained, and this precludes the use of the involved finger. In the case of a pianist or surgeon, or anyone who uses his fingers constantly, this means a considerable economic handicap. The advantages in using radium for this condition are: (1) absence of pain; (2) noninterference with function; (3) avoidance of secondary infection; (4) complete eradication of the lesions, and (5) perfect cosmetic result.

1015 Brockman Building.