How can podiatrists help with the toxic effect of medication on nails?

Nail toxicity is due to chemotherapy. Timely and preventative actions hopefully can avoid disruption to the patient's treatment cycle and ensure their mobility need not be affected by painful nails. There are three types of conditions that can affect the nail:

1. **Onycholysis** – separation of the nail

Onycho- (nail) and – lysis (separation). The nail separates from the nail bed and once this tight contact is lost the nail appears white and gaps provide a cavern for loose material to build up. Professional management is critical at a point where there is risk from poor healing during chemotherapy. Attention to good skin care, preventing infection and fragile skin tearing from nail cutting are important. The nail is usually cut back painlessly to expose healthy nail bed which if left can lead to a breakdown of the skin known as ulceration. Any unhealthy bulk is removed which alleviates pressure to the toe. This may not look pretty but it is a safe method in professional hands of a podiatrist to limit nail bed damage. Management from onycholysis is more about maintaining a status quo. The intervention prevents the skin around the nail from becoming inflamed (paronychia) and secondary infection of the nail fold and bed. Nail surgery is inadvisable because of the reduced healing potential when patients are having chemotherapy or radiotherapy.

2. **Involution** – the nail starts to excessively curl creating a pinching effect of the skin. This can lead to painful ingrown toenails and can quickly become infected

Pain and problems in the grooves of the nail due to the nail curling inward may require alleviation from pressure and prevention from the nail sides digging into the skin. If left unattended an ingrown toe nail may result. It is important to see a podiatrist during this time to prevent pain and infections occurring. Permanent damage to the nail arises after long periods of cancer therapy. Frozen sock therapy or specialised socks protocol used at our clinic **Tiptoe Foot Care** has been found to reduce nail toxicity, particularly in patients taking docetaxel. The application of antiseptics can help limit infection at the start.

3. **Fungal and bacterial infections** – the nail can start to appear discoloured, thickened and crumbly.

This is due to the drugs affecting cells with a high turnover rate such as nails and coupled with a weakened immunity, it allows opportunistic fungal infections to take hold. If a nail is suspected of an initial fungal infection, quick action taken is best to stop it in its tracks. Seeing your podiatrist to have as much of the fungus cut back as possible will help and they will be able to advise you on the best form of topical medication to use depending on the type of fungus it is.

Topical articles

- Issue 1. Cancer care, feet and podiatry
- Issue 2. Conditions affecting feet caused by medication to treat cancers

Supplementary facts and podiatry from Afni Shah-Hamilton

- How can podiatry help with peripheral neuropathy?
- How can podiatrists help with hand-foot syndromes?
- How can podiatrists help with Xerosis?