

A review of the clinical features of Green nail syndrome patients: A Single-Institution Experience

Ji-An UH, Joong-Ho KIM, Ho-Sung KIM,
Soo-Kyung Lee, Myoung-Shin Kim, Un-Ha Lee

Department of dermatology, Sanggye Paik Hospital
Inje University College of Medicine, Seoul, Korea

Background

- **Green nail syndrome (GNS)**

- Nail color turns green due to a pigment called pyocyanin produced by ***Pseudomonas aeruginosa***.

- **Affect patient's Quality of life (QOL)**

- Cosmetic problems
- Restricting work in certain facilities
- Restricting contact with immunocompromised persons, due to the possibility of spreading *Pseudomonas aeruginosa*

Background

- **Predisposing factor of GNS**

- Trauma
- Other nail disease (Psoriasis, Onycholysis, etc.)
- Humid condition

- **Treatment**

- Trimming and guttering
- Antibiotics: Oral or Topical

Objective

- In real-world clinical practice, the pain and potential for nail deformity make nail removal a burden, and it is not uncommon to see cases that are resistant to treatment.
- By analyzing the clinical characteristics of GNS patients, we intend to help in the treatment and prevention of future patients.

Methods_Study subjects

- This single center retrospective study included 34 GNS patients with clinical photo who visited the Dermatology Department of Sanggye Paik Hospital from 2009 to 2021.
- Collected data
 - Gender
 - Underlying disease
 - Location of affected nail
 - Number of affected nail
 - Type of cultured bacteria
 - Type of cultured fungus

Results _ Characteristics of study population

Characteristic	Value
Number of patients	34 (100)
Sex (%)	
M	11 (32.4)
F	23 (67.6)
Other nail disease (%)	6 (17.6)
Onychomycosis	5
Onychodystrophy	1

Results _Risk factor

- In 7 (36.8%) of 19 patients who stated the time of symptom onset, lesions occurred in the **summer**.
- Risk factors such as moist environment and trauma were identified in 8(23.5%) patients.

Results _Location, Number

- The **right thumb nail (32.4%)** was affected overwhelmingly.
 - followed by the right great toenail (23.5%) and the left great toenail (20.6%).
- 27 patients (79.4%) had a single lesion, 6 patients (17.6%) had two lesions, and 1 patient (2.9%) had four lesions.

Results _Culture

- *P. aeruginosa* was detected on 23 patients(67.6%).
- Fungal co-infection was found on 10 patients(29.4%).

Discussion

- Consistent with previous domestic report (Single center retrospective study with 78 patients)
 - Female predominance
 - Involvement of thumb nail or great toe nail was common
- Tailored therapy (Sensitive antibiotics, antifungal agents) based on culture result might be needed for some patients.
- Limitation
 - Small sample size

Conclusion

- The results of this study will be helpful for GNS patient care and education
- It will be more helpful if the factors that affect treatment response are confirmed through additional research.
 - Multi-center, large-scale
 - Sub group analysis
 - Treatment response comparison

References

1. Korean Dermatological association, Textbook of dermatology, 7th ed. Seoul; McGraw-Hill; 2020. P305, 449
2. Sewon K, Masayuki A, Anna LB, Alexander HE, David JM, Amy J.McMichael, Fitzpatrick's Dermatology, 9th ed.US; McGraw-Hill Education; 2019. P1568-1569, 1571
3. GW Lee, KN Bae, JH Son, KH Shin, HS Kim, HC Ko, et al. Clinical Characteristics of Green Nail Syndrome: A Retrospective Analysis. Korea J Dermatol. 2022;60(7);429-435.