Partial Matrix Excision or Orthonyxia for Ingrowing Toenails

Reference:

Scientific Literature Reviews

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Podiatric Relevance:
An ingrown toenail is very common in podiatric medicine with strong predilection for the hallux. There are numerous different methods for treating an ingrown toenail deformity described in the literature with a high recurrent rate of 24% using phenol. This study provides an alternative modality for ingrown toenails with a high success rate and patient satisfaction.

Methods:
A prospective randomized clinical observer blinded study with 12 months follow up total of 105 patients with 109 ingrown toenails. The Fraser procedure consists of attaching a small metal brace onto the dorsum of the nail was used in orthonyxia group.

Results:
There were 7 cases lost prior to completion of the study, consequently, 47 orthonyxia procedures and 55 partial matrix excision procedures were available for analysis. There were no marked differences in preoperative characteristics among the two groups. There was no statistical significance on the recurrence rate between the two groups, orthonyxia (7%) and PME (16%), p = 0.14, after 12 months. Postoperative morbidity after 1 week was notably less in redness (9.8 vs 55.2%, p<0.001), minimal exudate (3.9 vs 17.2, p=0.03), and zero postoperative bleeding (0 vs 8.6, p=0.06) in orthonyxia compared to PME group. Patient satisfaction favored orthonyxia on two counts, postoperative symptoms and cosmetic results (at 26 weeks p<0.001). There were no differences at 12 months between the two procedures.

Conclusions:
This prospective randomized study established two equally effective treatment procedures for unguis incarnatus. However, the orthonyxia procedure dictated better results, less postoperative complications, and greater patient satisfaction than partial matrix excision.