



Suffolk Podiatry

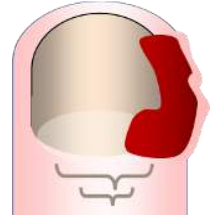
Ingrowing Toenails

What is an ingrowing toenail?

An ingrowing toenail is a nail that has pierced the flesh of the toe (acting like a splinter).

The affected toe may become warm, red, swollen and painful.

If left untreated, it may become infected or start to bleed.



What can cause an ingrowing toenail?

- Sweaty feet, as this makes it is easier for the nail to pierce the flesh.
- Cutting nails too short or cutting into the corners, irritating the skin at the sides of the nails.
- Picking at the toenails and leaving sharp edges, especially in the fold at the sides of the nail.
- Fungal infection which may also change the shape of the nail.
- Poor shape of the nail (either inherited or damaged through injury). A broad toenail is more likely to aggravate the skin at the sides.
- Tight shoes or socks may force the nail into the skin.

How can I prevent it?

When cutting the toenail always cut in a gentle curve following the shape of the end of the toe. The corner of the nail should be visible above the skin. Do not cut down the sides of the nail.

Always wear shoes with sufficient room in the toe box. A good shoe should have a finger's width of space around the end of the toes, so that you should be able to wiggle the toes freely.

Try to find ways of reducing foot sweat, such as wearing leather shoes and cotton socks which naturally wick away perspiration.

What should I do if I think I have an ingrowing toenail?

Contact your local podiatry service for an appointment. (You may have already done this by completing our online referral process at <https://www.podiatryreferrals.co.uk>)

It would be helpful if you could e-mail a photograph of your toe to: sgpfed.myfeet@nhs.net

In the meantime:

- 1) Bathe the foot daily in warm, concentrated salt water (enough salt so that some is not dissolved in the water). This will help reduce or prevent infection.
- 2) Allow the foot to dry naturally in the air (by sitting with your foot up on a stool for example) The toe should then be covered with a sterile gauze dressing to keep it clean. Do not put the dressing on too tightly.
- 3) Continue to salt water bathe, air-dry, and re-dress the toe daily.

- **Patients with diabetes or in poor health** should contact their GP for antibiotics if pus can be seen or if the toe is red, hot, inflamed and painful.
- **Do not try to poke down the sides of the nail.**

What could a podiatrist do?

Depending on how bad the nail is, it may be possible for the podiatrist to clip the spike of nail away.

If the nail does not improve, or if the ingrowing toenail requires surgery, your podiatrist may recommend one of the following nail surgery procedures:

- **Partial Nail Avulsion** - where only the affected part of the toenail is removed
- **Total Nail Avulsion** - where the entire toenail is removed

Both procedures are very minor and only take 30-60 minutes, after which you will be able to go home. Both partial and total nail avulsion procedures follow the same process:

- 1) The toe will be injected with local anaesthetic to make it numb.
- 2) A band will be put round the toe to reduce bleeding.
- 3) The whole nail or part of it will be removed as required.
- 4) The bed from which the nail grows will be treated to help prevent the nail from growing back and causing further problems.
- 5) A large dressing will be applied after the surgery. You will need to rest your foot for 48 hours and keep it dry. This may require taking time off school or work, if applicable.
- 6) You will need to re-dress the foot regularly until healed. The wound will take several weeks to heal completely.

Wearing open or roomy footwear may help promote faster healing.

Where can I find out more?

More information about ingrowing toenails is also available at:

<http://www.nhs.uk/conditions/Ingrown-toenail/Pages/Introduction.aspx>

Suffolk Podiatry
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An NHS service provided by Suffolk GP Federation working with ESNEFT (East Suffolk & North Essex NHS Foundation Trust) in the East, West Suffolk NHS Foundation Trust in the West, Suffolk County Council and Norfolk & Suffolk NHS Foundation Trust