

Melanoma of the Nail Unit

Melanoma Ungueal

Laís CATIZANI LOPES 1, Mariana CASTRO GUIMARÃES2, Joana PIMENTA MARQUES3, André LENCASTRE4.5 Acta Med Port (In Press) https://doi.org/10.20344/amp.20805

Keywords: Melanoma/diagnosis; Nail Diseases/diagnosis **Palavras-chave:** Doenças da Unha/diagnóstico; Melanoma/diagnóstico



Figure 1 – Ulceration of the nail bed and destruction of the nail plate, accompanied by pigmentation of the perinychium (Hutchinson's sign)

A 75-year-old woman presented with an ulcerated nail bed in the first toenail of the right foot, which evolved for two years. Initially self-diagnosed as onychomycosis, she self-medicated with topical antifungals. Progressive worsening led her to seek care from her family physician.

An extensive ulceration replaced the nail bed with almost complete nail plate destruction without inflammatory signs. A pigmented patch with poorly defined edges covered the proximal, lateral, and distal nail folds. She was referred to Dermatology and a histological diagnosis of invasive ungual malignant melanoma was made. This rare disease has a slow growth rate, and its diagnosis is often delayed as it is commonly misdiagnosed as an infection, wart or chronic ulceration. Treatment delay is associated with a poor prognosis, and, as in this case, amputation of the digit is necessary.

Physicians should be aware of broad (> 3 mm), single digit, densely black bands on the nails, particularly if accompanied by nail plate destruction and ulceration.³

AUTHOR CONTRIBUTIONS

LCL: Study design, data collection, literature search, writing and critical review of the manuscript.

MCG: Study design, literature search, writing and critical review of the manuscript.

JPM: Literature search, writing and critical review of the manuscript.

AL: Data collection, writing and critical review of the manuscript.

All authors approved the final version to be published.

- 1. Unidade de Saúde Familiar Artemisa. Unidade Local de Saúde de Lisboa Ocidental. Parede. Portugal.
- 2. Unidade de Saúde Familiar KosmUS. Unidade Local de Saúde de Lisboa Ocidental. Parede. Portugal.
- 3. Unidade de Saúde Familiar São João do Estoril. Unidade Local de Saúde de Lisboa Ocidental. Estoril. Portugal
- 4. Hospital de Cascais. Cascais. Portugal.
- 5. Hospital da Luz. Lisboa. Portugal

🖂 Autor correspondente: Laís Catizani Lopes. laiscatizani@gmail.com

Recebido/Received: 12/10/2023 - Aceite/Accepted: 28/11/2023 - Publicado Online/Published Online: 17/05/2024

Copyright © Ordem dos Médicos 2024



PROTECTION OF HUMANS AND ANIMALS

The authors declare that the procedures were followed according to the regulations established by the Clinical Research and Ethics Committee and to the Helsinki Declaration of the World Medical Association updated in 2013.

DATA CONFIDENTIALITY

The authors declare having followed the protocols in use at their working center regarding patients' data publication.

PATIENT CONSENT

Obtained.

COMPETING INTERESTS

The authors have declared that no competing interests exist.

FUNDING SOURCES

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

REFERENCES

- 1. Longo C, Pampena R, Moscarella E, Chester J, Starace M, Cinotti E, et al. Dermoscopy of melanoma according to different body sites: head and neck, trunk, limbs, nail, mucosal and acral. J Eur Acad Dermatol Venereol. 2023;37:1718-30.
- 2. Dika E, Lambertini M, Pellegrini C, Veronesi G, Melotti B, Riefolo M, et al. Cutaneous and mucosal melanomas of uncommon sites: where do we stand now? J Clin Med. 2021:10:478.
- Weber P, Tschandl P, Sinz C, Kittler H. Dermatoscopy of neoplastic skin lesions: recent advances, updates, and revisions. Curr Treat Options Oncol. 2018;19:56.