



Tom's Disfigured Toenail

Stanley J. Wine, MD, FRCPC

Meet Tom

- A 52-year-old male presents with a disfigured big toenail
- He believes that the disfiguration resulted from an injury that occurred at least one year ago
- It is asymptomatic



What is your diagnosis?

- a) Tinea fungus
- b) Melanoma
- c) Trauma
- d) Nevus
- e) Verruca

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See page 2 for the answer to last month's case





Here is the answer to last month's case

Meet Francesca

This five-year-old girl initially presented with complaints of itchy, tender, palpable spots on the right side of her scalp. Two days later, a rash appeared on her forehead that worsened with the application of cortisone cream. She is otherwise healthy.



What is your diagnosis?

- a) Impetigo
- b) Seborrheic dermatitis
- c) Herpes zoster
- d) Pediculosis capitis
- e) Folliculitis

Answer: C

While Herpes zoster (**answer c**) is seen infrequently in children, it should still be suspected when symptoms and signs are unilateral. As in adults, symptoms of itch, pain, or burning may occur several days prior to the onset of physical findings. Pain can range from mild to severe.

What induces the reactivation of Varicella zoster virus (VSV) is unclear; presumably it is

secondary to diminished cellular immunity. It is more likely to occur in children exposed to VSV in utero or in those who had chicken pox in their first-year-of life. Immune deficiency could also influence reactivation.

In cases associated with immune deficiency, Herpes zoster in children usually lasts one to three weeks, and it rarely requires any intervention. An exception would

be if the trigeminal (V1) involvement, as seen in this case, involves the nasociliary branch possibly leading to corneal ulceration.

Post herpetic neuralgia is not a factor other than in complicated cases.

Stanley J. Wine, MD, FRCPC

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