



NAIL DISORDERS

## A CASE OF SUBUNGUAL SQUAMOUS CELL CARCINOMA RESEMBLING ONYCHOMYCOSIS

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**Background:** Subungual squamous cell carcinoma (SCC) is rare but it remains the most common primary malignant neoplasm of the nail bed. Since the clinical presentation is often atypical and can mimic benign nail disorders its diagnosis is often missed or delayed. We present a case of subungual SCC which is initially diagnosed as onychomycosis failed to respond to long-term antifungal treatments.

**Observation:** A 67-year-old male patient presented to our outpatient dermatology clinic with feeling of discomfort and mass under his 4th finger nail of left hand for 6 years. Considering distal subungual onychomycosis for about 4 years, long term topical cycloprololamine, systemic terbinafine and itraconazole treatments were applied in various clinics. Upon the failure of the treatments, the distal part of the nail plate was excised and the tumour on the nail bed was exposed. On physical examination, hemorrhagic and ulcerated verrucous subungual tumour was observed on the nail bed of the left hand of the 4th finger. Histopathological examination revealed atypical squamous cells with large, hyperchromatic nucleus infiltrating dermis. Based on the clinical and histopathological findings the patient was diagnosed with subungual SCC. Because of suspicious degenerative changes on X-ray of left hand, total nail avulsion was applied. Upon surgical borderline positivity in initial biopsy and suspicious proximal interphalangeal joint (PIF) involvement, it was performed digital amputation from PIF by plastic surgery department. In amputation material, surgical margins were negative and no metastases were found in the lymph nodes of the left axilla.

**Key Message:** Because it can resemble many benign nail pathologies such as onychomycosis subungual SCC should be considered in a nail pathology that does not respond to conventional treatments. Since delays in diagnosis can result in amputation as in the current case, nail plate avulsion and histopathologic examination should be done for early and accurate diagnosis.

