

NAIL DISORDERS

RETROSPECTIVE SINGLE-CENTER STUDY EVALUATING CLINICAL AND DERMOSCOPIC FEATURES OF LONGITUDINAL MELANONYCHIA, ABCDE F CRITERIA, AND RISK OF MALIGNANCY

Dayoung Ko⁽¹⁾ - Clara Oromendia⁽²⁾ - Richard Scher⁽³⁾ - Shari Lipner⁽³⁾

*Duke University School Of Medicine, N/a, Durham, United States⁽¹⁾ - Weill Cornell
Medicine, Division Of Biostatistics And Epidemiology, Ny, United States⁽²⁾ - Weill Cornell
Medicine, Dermatology, Ny, United States⁽³⁾*

Introduction: Longitudinal melanonychia (LM) is a common finding in clinical practice, but has a broad differential diagnosis, including subungual melanoma (SUM), which can be difficult to distinguish clinically from benign conditions.

Objective: To identify clinical and dermoscopic features that distinguish histopathologically diagnosed SUM from benign LM and to evaluate the validity of ABCDEF criteria among biopsied patients.

Materials and Methods: Retrospective cohort study of consecutive patients who underwent nail matrix biopsy for LM at a single center, January 2011 to November 2017.

Results: 84 biopsied cases (8 SUM and 76 benign) were included in the analysis. SUM patients were younger ($p=0.011$), had their melanonychia for longer ($p=0.017$), presented with a wider band ($p=0.002$) and greater width percentage ($p<0.001$) than benign LM patients. The number of ABCDEF criteria met did not differ among the groups.

Conclusions: Of the biopsied LM cases, SUM usually presented with a wider band and greater width percentage than benign LM. The number of ABCDEF criteria met was not different among the groups. Since many of the clinical and dermoscopic signs were less consistent, any concerning band should undergo biopsy, especially with width percentage $>40\%$.