NAIL DISORDERS

STUDY OF CLINICOMYCOLOGICAL PROFILE OF ONYCHOMYCOSIS- A CROSS SECTIONAL STUDY

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Introduction: Onychomycosis is caused by dermatophytes, non dermatophyte molds(NDM) or yeasts. Various Indian workers have reported the incidence to be 0.5-5% in general population. Geographical distribution of fungi may change from time to time and the correct etiological diagnosis is important in deciding the best antifungal agent warranted in a particular case.

Objectives: To study clinical profile of onychomycosis in patients attending Dermatology OPD, to know the etiological agent responsible, systemic conditions associated with onychomycosis and compare findings seen in our study with previous studies.

Materials and Methods: Fifty patients of clinically suspected onychomycosis attending Dermatology OPD were included in the study. Patients who had taken topical or systemic antifungal medication within six months and those with nail psoriasis, lichen planus, subungual/periungual warts were excluded. Informed consent, detailed history and examination was done. Nail samples were subjected to direct microscopy, culture. Urease test was done to differentiate between deratophyte species.

Results: Distal Lateral Subungual Onychomycosis was the commonest variant(94%). KOH was positive in 72% cases and culture in 36%.The difference between KOH mount and culture positivity was statistically significant(p=0.0009). NDM were commonest organisms(55.55%), among which Aspergillus species dominated, followed by Dermatophyes (33.33%) ,T.mentagrophytes being the commonest. Associated systemic conditions were found in 64%, Diabetes mellitus(DM) being commonest(p=0.0003).

Conclusion: Our study found NDM as the commonest organism causing onychomycosis in contrast to previous studies which reported dermatophyte as the commonest agent. Hence NDM previously recognised as a mere contaminant should be recognised as a potential pathogen and some of them may require longer treatment as compared to dermatophytes. It is also important to look for co-morbid conditions like DM associated with onychomycosis

that can change the etiological agent.