



NAIL DISORDERS

CLINICAL AND HISTOPATHOLOGICAL STUDY OF NAIL LICHEN PLANUS

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Introduction: Nails are involved in upto 10% patients with lichen planus (LP). There is relative paucity of data regarding the spectrum of clinical and histopathological features of nail LP. Nevertheless, nail biopsy has been used for confirming the diagnosis, especially for cases with isolated nail LP.

Objective: To study the clinico-histopathological features of nail involvement in LP.

Methodology: We examined 45 patients with clinically suspected nail LP. A thorough clinical and nail examination was done and biopsy taken from the most involved nail (bed biopsy in 25 and matrix biopsy in 20 cases).

Results: The mean age of patients was 36.91 years with a M:F ratio of 1.81:1. Most common clinical variant of LP in our patients was found to be oral LP (51.11%), with isolated nail involvement in 28.88% cases. Clinically, the nail changes in the majority of patients consisted of onychorrhexis (92.34%), longitudinal melanonychia (74.31%) and nail bed erythema (54.09%). On histopathological examination, hypergranulosis of nail matrix and bed epithelium was the most common finding (51.11%), followed by saw tooth acanthosis (44.44%) and lichenoid band (24.44%). A clinico-histological correlation using prevalent diagnostic criteria was noted in 51.11% patients. Fraying of nail plate, a change not previously described, was noted in 33.33% of our cases.

Conclusion: Nail involvement is a significant component of LP, seen in 40.66% nails. Histopathology has been attributed a confirmatory role; however, the existing diagnostic criteria are not very sensitive, need to be further refined to improve diagnostic outcomes. Not hitherto described features like fraying of nail plate are seen in a significant number of cases.

