



Patient Information

Ingrown Toenail

Onychocryptosis — or ingrown toenail — can make your life miserable. Any pressure on the nail can cause pain.

An ingrown toenail occurs when the skin alongside the toenail grows over the nail so that the edge of the nail disappears beneath the skin. The condition is common in adults, but rare in children and infants.

Although the condition is most common along the outside edge of a big toe, an ingrown toenail can occur on any toe and on either — or both — sides. Even fingernails can become ingrown, but this condition is rare.

Ingrown toenails become infected easily, especially in warm, moist or dirty shoes. Infection causes the redness, swelling, pain and drainage.

Causes

Ingrown toenail can result from anything that causes the toenail to grow into the skin. These are some of the most common causes:

- naturally curved toenails that grow down into the side of the toe
- improper nail trimming that leaves a sharp edge or spike
- shoes that are too tight or too short
- high heels that cause toe crowding
- tight socks
- trauma such as stubbing a toe
- fungal infection that causes the nail to thicken or grow wider
- sheets tightly tucked over the feet of people who are bedridden.

Treatment at Home

If your ingrown toenail isn't infected and too painful, you may attempt to treat it at home. Follow these steps:

- Soak your foot several times a day in warm, soapy water. Then rinse and dry your foot well with a clean towel.
- Gently try to lift the corner of the embedded nail, and insert a small piece of rolled cotton or short length of waxed dental floss under the toenail. This will be painful, but it will elevate the nail and get it growing on the right track.
- Change the gauze or floss daily. Gently try to push the gauze or floss a bit farther under the nail after each soaking.

- Wear clean, comfortable shoes and socks until the condition clears up. Open-toed shoes are recommended.

- Several devices are available without a prescription to help with healing, including soft-foam toe caps to relieve pressure from footwear and a brace to keep the toenail elevated (NailEase).

When to See Your NP

If you see no improvement after several days of home treatment, or if you develop any of the conditions below, see your nurse practitioner. Attempting to treat an infected toenail without sterile instruments could make the condition worse.

- Your ingrown toenail is inflamed, painful or infected.
- You have poor circulation or diabetes, or you are immunocompromised or on chemotherapy.
- You haven't had a tetanus booster in more than 5 years.

Your NP may decide to numb your toe and remove part of the embedded nail with a scalpel. If the problem seems likely to recur, the NP may use a chemical solution to permanently remove part of the nail. The toenail will grow back narrower so that it doesn't dig into the skin. In very severe cases or with highly curved toenails, the entire nail may be removed.

Your nurse practitioner may prescribe a topical ointment and advise you to keep your treated toe dry and covered with gauze for a few days. Unless infection is severe, antibiotics are usually not needed.

Prevention

There are several steps you can take to prevent ingrown toenail:

- Trim your toenails straight across, not curved to follow the shape of the toe. The nail should be almost as long as the toe — don't trim too short.
- Don't pick, tear or dig into your toenails.
- Wear comfortable shoes and socks that don't crowd the toes.
- Protect your toes from trauma.
- Keep feet clean and dry to prevent bacteria growth.
- If you have a recurrent ingrown toenail, your NP may recommend permanently removing all or part of the nail. ❖

Additional Notes:
