

IMAGES IN CLINICAL MEDICINE

Acquired Melanonychia



Dana Ranta, M.D.
Caroline Bonmati, M.D.

Centre Hospitalier Universitaire Nancy–
Brabois
Vandoeuvre-les-Nancy, France

AN 80-YEAR-OLD WOMAN PRESENTED WITH LONGITUDINAL MELANONYCHIA, or longitudinal dark pigmentation of the nails (arrows). She first noticed it more than a year after the start of hydroxyurea treatment for essential thrombocythemia. Although all nails can be affected, in this patient only the two thumbnails were involved. She had no other side effects of therapy, and no other mucocutaneous hyperpigmentation was observed. At the time of presentation, she was not taking other drugs implicated in nail discoloration and had no symptoms attributable to essential thrombocythemia. The platelet count was 420×10^9 per liter. Melanonychia is a rare side effect of hydroxyurea therapy. The differential diagnosis includes subungual melanoma, pigmented squamous-cell carcinoma, subungual hematoma, nevus, and hyperpigmentation due to other drugs, including cyclophosphamide, doxorubicin, minocycline, and zidovudine. The mechanism of hydroxyurea-induced melanonychia is unknown; potential causes include toxicity affecting the nail bed or nail matrix, focal stimulation of nail-matrix melanocytes, and photosensitization.

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