

# Paronychia

## What is "paronychia"?

A localised, superficial **infection or abscess** of the skin around a nail, causing painful swelling. Most acute infections are caused by bacteria, and usually occur because of trauma to the area. Risk factors include manicures, frequent immersion in water, nail biting, a hang nail, and ingrown nail.

## What are the symptoms?

- Pain and **swelling** at the base of the fingernail
- Localised pain and tenderness of the nail folds
- Red, tender and swollen nail folds, often with a visible collection of **pus**



## How is it treated?

Most cases get better in 2 to 4 days with treatment. Options include:

- **Topical antibiotics**, such as fusidic acid cream, for minor, localised infections
- **Oral antibiotics** if incision and drainage cannot be performed, or it was performed but there is significant pain, signs of cellulitis or fever, or in some specific cases where you have other conditions: such as flucloxacillin or clarithromycin / erythromycin if you are pregnant or breastfeeding

## How can I help myself?

- Apply **moist heat** (warm soaks) for ten to fifteen minutes, three to four times a day - this will help with the pain and bring the pus to a head
- Take **painkillers** such as paracetamol or ibuprofen if you can
- Keep the affected areas clean and dry
- Avoid further trauma or manipulation of the nail
- Trim hang nails to a semi-lunar smooth edge, and avoid biting nails or lateral nail folds
- If you work with your hands in a moist environment, wear cotton-lined **gloves** to protect your fingers
- Read the following patient information leaflets:



[www.patient.info/skin-conditions/paronychia-leaflet](http://www.patient.info/skin-conditions/paronychia-leaflet)



[www.nhs.uk/conditions/nail-problems](http://www.nhs.uk/conditions/nail-problems)

## When should I seek further help?

- The infection is **spreading** (it looks like it's getting bigger)
- Treatment has **not worked** within 2 to 3 days
- You are feeling **unwell** (for example have a fever)
- You are immunocompromised
- You have diabetes
- You keep getting paronychia
- You have had contact with **MRSA**
- It is not clear whether or not you have paronychia
- If the abscess is large with a collection of pus, incision and drainage by a healthcare professional is recommended - this may require referral to a surgical unit or emergency department