

Paronychia

This leaflet offers information for parents whose child has an infection around the tip of their finger(s) or toe(s), known as a paronychia. If you have any further questions, please speak to a doctor or nurse caring for your child.

What is Paronychia?

A paronychia is an infection of the finger or toe where the nail and skin meet at the side or base of the finger or toenail. Paronychia is sometimes called 'whitlow'.

A paronychia can occur following an apparently minor trauma to the finger or toe, such as a splinter or thorn. It can also occur because of nail biting, finger sucking or biting/picking at the skin next to the nail.

A collection of pus can develop around and under the nail usually because of a bacterial infection. It may be painful and the fingertip or toe can look red and feel hot when touched.

What treatments are available?

Treating paronychia depends on how serious the infection is and whether it has started to spread.

Often soaking the infected finger in warmed salted water four times a day will resolve the infection in a few days. Painkillers, such as ibuprofen or Calpol (paracetamol) will help to ease the pain in the finger.

Your child may have already been started on antibiotics and will have an x-ray of the affected finger/toe to check the bone hasn't become infected. If there is any concern that the infection has spread into the bone, your child may need to be admitted to hospital for a prolonged course of antibiotics. Otherwise, your child may be discharged with a course of oral antibiotics to complete at home.

They may also need a short operation to remove the nail and wash out the infection from under the nail and surrounding skin of the finger or toe. This is normally carried out under general anaesthetic but can also be done when your child is awake with some injections in the base of the finger to make it numb. There are small risks associated with surgically treating the infection and the anaesthetist and surgeon will take you through these, providing an opportunity for you to ask any questions.

Asking for your consent

It is important that you feel involved in decisions about your child's care. For some treatments, you will be asked to sign a consent form to say that you agree for your child to have the treatment and understand what it involves. You can withdraw your consent at any time, even if you have said 'yes' previously. If you would like more details about our consent process, please ask for a copy of our policy.

What if the paronychia doesn't resolve?

If the infection persists in the same finger for six weeks or more, it is called chronic (meaning persisting) paronychia. There may be an underlying skin condition or the infection might be caused by a yeast or fungus, rather than bacteria. We would advise seeing your GP if the problem persists as there are a variety of treatment options if this is the case. These include:

- Avoiding skin irritants, such as certain soaps or detergents and stopping your child from biting their nails and finger sucking.
- Treating underlying skin conditions.
- Steroid creams, antifungal creams or antifungal tablets.

It may also be at this point that an operation is appropriate.

What do I need to do after my child goes home?

If your child has been discharged from the Emergency Department with antibiotics, you must complete the course of antibiotics even if the infection has seemingly cleared before the course is due to finish.

Discourage your child from biting their nails or sucking their fingers/thumbs as this will only increase the risk of returning or worsening infection. Dry your child's hands well after washing them and do not allow them to wear gloves or artificial nails for prolonged periods. When cutting your child's nails ensure they aren't trimmed too short.

If your child has had an operation, specific instructions will be given by the surgeons and a follow up will be arranged to review the finger/toe and change the dressing.

Once the infection has resolved your child can get back to all their normal activities, including bathing and swimming. Sometimes children can find looking at their infected finger or operation wound distressing. If this happens you can cover the area with a plaster until they become used to it.

When should I return to the Emergency Department?

Generally, paronychia is an infection that can be managed by your GP however, you should return to the Emergency Department in the following situations:

- Your child develops a fever or becomes generally more unwell.
- Your child's finger/toe is becoming more red and painful or a swelling develops/the pre-existing swelling becomes bigger.
- Your child develops pain further up the finger or is unable to bend one of the finger joints fully.
- Your child develops increasing pain when bending their finger.
- You feel something is not quite right with your child despite following the advice on this leaflet.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health. **Web:** www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones. **Tel:** 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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