

Nail bed repair

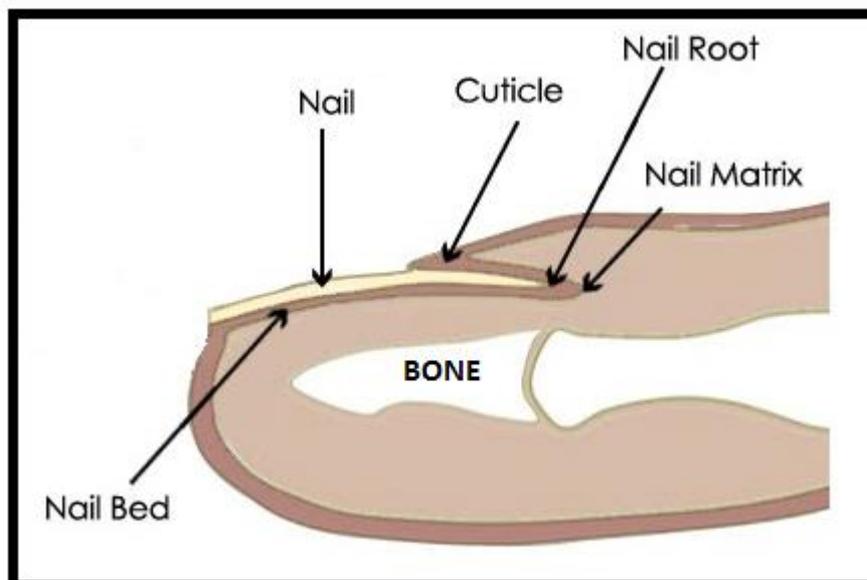
This sheet answers common questions about a nail bed repair. If you would like further information, or have any particular worries, please do not hesitate to ask your nurse or doctor.

In all cases, a doctor will explain the operation to you and answer any questions you may have.

In most cases it will be possible for a friend or relative to accompany you for all or part of the operation. Please ask your nurse or doctor.

What is the nail bed?

The nail bed is the tissue sandwiched between the nail itself and the underlying bone. The nail bed tissue is responsible for allowing the nail to grow normally. The nail grows from the root of the nail bed (called the nail matrix) with the rest of the nail bed being responsible for ensuring that the nail remains stuck down and retains its shiny appearance.



A cross-section of a fingertip showing the nail, nail bed and underlying bone.

What happens when the nail bed is injured?

This is a very common injury. Because the nail bed is sandwiched between the nail and bone, accidents that damage the nail bed often crack the nail and break the bone of the fingertip as well. It is also common to have cuts to the skin around the nail and fingertip.

These are important injuries to seek treatment for, as cuts across the nail bed can cause problems with the nail not growing normally. A short operation can be performed to repair the cut(s) in the nail bed. Although this is done to minimise the risk of the nail not growing normally, it cannot guarantee normal nail growth in the future.

What does the procedure involve?

In most cases, you will be awake for the operation. To begin with, the surgeon will inject some local anaesthetic at the base of your injured finger. This is often described as feeling like a bee-sting. After one to two minutes the injured finger will be numb to pain.

The operation involves removing any remaining nail to allow the surgeon to see the nail bed tissue. The injury is thoroughly cleaned with sterile fluid and the cut in the nail bed is then stitched together using dissolving stitches. Any cuts in the skin around the nail bed will also be stitched back together with dissolving stitches at the same time. The surgeon may or may not replace the nail after repairing the cut in the nail bed.

A dressing is then placed over the injured finger/thumb and this should remain in place until you are seen again in clinic.

Before your procedure

When you are seen in our trauma clinic, you will be given written information on when and where to come for your operation. Most nail bed repairs are performed with you awake using local anaesthetic. This means you can eat and drink as normal before your operation.

After your procedure

You are able to go home on the same day of your operation. We would strongly advise against driving yourself home after the operation as you will not be able to safely grip the steering wheel and your insurance company may not consider you safe to drive. If the operation was performed with you awake, it is safe to use public transport to travel home. If you were asleep for the operation you will need someone to come to collect you and take you home.

When at home

You will be provided with some painkillers to take home and it is important that you finish the course of antibiotics that were given to you when you first had the injury. When at home, keep the arm elevated above the level of your heart for the next week to reduce swelling and pain. When washing or showering, keep the dressing dry by covering the affected hand with a plastic bag taped around the wrist.

Follow-up

We will give you an appointment to return to our clinic after one week to check the wounds and change the dressing. The nurses will then arrange any further appointments to check your wound at this time.

Using the hand

Straight after injuring your nail bed, it is important to continue moving the arm and hand to prevent any of the joints becoming stiff. You should aim to complete the following exercises 10 times, once per hour:

- Lift your arm above your head to stop the shoulder becoming stiff.
- Fully bend and straighten your elbow.
- Move your wrist in all directions.
- Fully straighten the thumb and then touch the little finger with the tip of your thumb.
- Make a full fist and then completely straighten the fingers.

It takes around three to six months for your nail to grow back. It is likely that the first one or two nails that grow through will not look entirely normal and may fall off.

Main risks and side effects

Pain

Injuries and operations on the fingertip and nail bed can be painful. The local anaesthetic injected at the time of the operation should keep the affected finger pain free for four to six hours after the operation. Following this period, elevation of the arm and taking the painkillers provided should control the pain.

Bleeding

It is not uncommon for there to be a small amount of bleeding into the dressing after the operation. In these circumstances, elevate the hand above heart level and squeeze the fingertip for 20 minutes. If bleeding persists and the dressing becomes soaked with blood, please return to the Royal Free Hospital A&E department where one of our team will come to check the wound.

Infection

At the time of injury dirt and bugs can get into the cut. The risk of an infection developing is reduced by taking the complete course of antibiotics given to you and by us cleaning the nail bed and fingertip thoroughly during the operation. If, however, you notice increasing pain, an unpleasant odour or yellow fluid coming through the dressing, you may have developed an infection. Please contact the dressing clinic to be seen.

Abnormal or absent nail growth

The main risk of this injury is the nail not growing normally. This may be the nail not growing at all, growing in two or more pieces, or growing with ridges/marks on the nail itself. This can continue to improve up to two years after the injury and operation.

Stiffness in the finger

You are likely to have some stiffness in the injured finger for the first month after the injury. It is important to complete the exercises mentioned above to minimise this.

Cold intolerance

The affected finger/hand may become painfully cold in the winter months. This may settle with time and is best avoided by wearing appropriate clothing to keep the hands warm.

Complex regional pain syndrome

Around 5% of patients may experience complex regional pain syndrome of the affected finger or the whole hand after the injury. This is an unusual reaction to trauma and results in pain, swelling, stiffness and increased sensitivity in the hand and must be treated with special medication and intense therapy.

Do you have any further questions?

If you have any further questions or concerns regarding your injury or operation, you can contact our hand trauma clinic on 0207 794 0500 x 31312.

Other useful contacts:

Day surgery – 0207 794 0500 x 38586

Hand therapy – 0207 317 7703

Plastic surgery dressing clinic – 0207 794 0500 x 31312

If you would like a large print or audio version of this information, please ask a member of staff.

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