



# HABIT TIC NAIL DEFORMITY

<http://www.aocd.org>

Habit tic nail deformity is a form of nail degeneration that results from constant external trauma to the nail matrix (where the fingernails start to grow, the root) that manifests as nail plate (top of the nail) changes. The cuticle (flap of skin covering the bottom of the nail) is often detached, damaged and may be totally missing. Constant trauma to the root manifests as loss of nail shine. The patient is often unaware or unconscious of this behavior. Although any nail may be affected, involvement of both the thumbnails is classical.

Overall, the nail resembles a washboard and hence the name “washboard nails.” In severe cases, lunulae (crescent-shaped whitish area of the bed of a fingernail) may become overgrown and the root may lie exposed.

The deformity falls under the wider category of conditions described as Nail Tic Disorders. They are examples of body-focused, repetitive behaviors in which there is an irresistible urge or impulse to perform a certain behavior. This urge can be alleviated for a short time once the action is performed. However, the habit tic nail deformity is more of a habit and therefore, is often not associated with anxiety before the fingernail manipulation or any feeling of relief after the act. It is less often associated with psychiatric co-morbidities such as obsessive compulsive disorder.

Treatment aims at stopping the habit after which nail changes revert completely. Gentle massaging with bland ointment was found to be effective in two-thirds of patients. Use of physical barriers such as bandaging or tape application on the bottom of the nail helps both by directly preventing trauma and by acting as a reminder and deterrent to the habit of picking. Recently, the use of cyanoacrylate adhesive (a kind of instant glue) has been found to be a useful and inexpensive therapeutic modality. The glue is used to recreate the barrier between the base of the nail and nail plate thereby preventing further trauma and allowing time for the root to heal.

**This information has been provided to you compliments of the American Osteopathic College of Dermatology and your physician.**

*The medical information provided in this article is for educational purposes only and is the property of the American Osteopathic College of Dermatology. It is not intended nor implied to be a substitute for professional medical advice and shall not create a physician - patient relationship. If you have a specific question or concern about a skin lesion or disease, please consult a dermatologist. Any use, re-creation, dissemination, forwarding or copying of this information is strictly prohibited unless expressed written permission is given by the American Osteopathic College of Dermatology. For detailed information including links to related topics on this and many other skin conditions with photos, visit: <https://www.aocd.org/page/DiseaseDatabaseHome>*