

Four Fattened Phalanges

Match the diagnosis to the photo by letter

- a. Digital fibromyxoma
- b. Dermatofibrosarcoma protuberans
- c. Subungual exostosis
- d. Onychomatricoma

1. A 54-year-old Colombian man presents with nail dystrophy of two years' duration. Physical exam reveals longitudinally banded thickening of the lateral half of the nail plate, with yellowish brown discoloration, transverse overcurvature of the nail, longitudinal white lines, and splinter hemorrhages.
2. A 21-year-old woman has a slow-growing, asymptomatic nodule on the great toe. She denies antecedent trauma. A firm, flesh-colored, semimobile, nontender, subungual nodule can be seen in the distal lateral nail bed, extending into the adjacent tissue. Radiographic exam shows focal calcification of the nodule, with direct communication to the underlying distal phalanx.
3. For the past year, a 30-year-old man's left great toe has had a 3-cm exophytic, yellowish red, subungual nodule that is obliterating the nail plate. Ten years ago, a similar nodule in the same location was removed via laser by a podiatrist. Plain radiographs demonstrate an inferior cortical lucency of the distal phalanx, as well as a lucency over the nail bed with calcification extending to the soft tissues. MRI reveals bone erosion from the overlying mass.
4. A 41-year-old man presents with a slowly growing, tender lesion located on the left great hallux. When it first appeared five months ago, it resembled a blister. On exam today, a firm, 3.5-cm, flesh-colored, pedunculated nodule is seen on the lateral aspect of the toe. No lymphadenopathy is found. The patient reports no history of keloids or trauma to the foot.



For answers, see next issue;
for discussion, go to

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Answers to the November "Picture This" (*Clinician Reviews*,
2017;27[11]:39): 1c, 2a, 3b.