

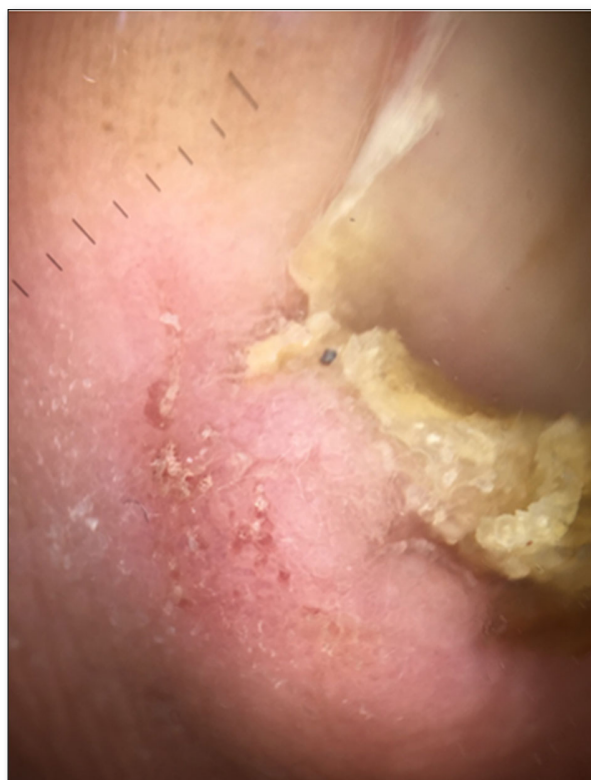
Verruca Vulgaris on the Ingrown Toenail: Clinical Image

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We report a 20 year old who visited our department for an ingrown nail. Physical examination revealed an exophytic keratotic projection in the lateral fold of the ingrown nail. Dermoscopy revealed a papillomatous appearance, hyperkeratosis with red dot or loop, surrounded by a whitish halo. On the basis of clinical and dermoscopy examination, final diagnosis of Verruca vulgaris on the ingrown toenail was given. Surgical excision was performed and the histopathological examination confirmed the diagnosis of Verruca vulgaris. Verruca vulgaris are benign growths caused by inoculation of human papillomavirus (HPV). Predisposing factors are immunosuppression, trauma (including onychophaty) and exposure to water (hyperhidrosis, butchers and dishwashers). Commonly used therapies include surgical excision, topical salicyclic acid, imiquimod, 5-fluorouracil or retinoids; CO₂ laser, cryotherapy using liquid nitrogen; *Candida albicans* antigen; and intralesional bleomycin.



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