

## Chloronychia: Fox–Goldman syndrome

Julio Salas-Alanís<sup>1</sup>, María G. Moreno-Treviño<sup>2</sup>, Gerardo Rivera-Silva<sup>2</sup>

<sup>1</sup>Dermatologist, Department of Dermatology, Dermatological Institute of Jalisco, Zapopan, JAL, <sup>2</sup>Vice-rector of Health Sciences, Department of Academic, School of Medicine, University of Monterrey, Monterrey, NL, Mexico

A 48-year-old woman came to our clinic with a symptomatic greenish discoloration of the nail plate of the left thumb that had occurred spontaneously 6 months previously. The patient has a history of diabetes mellitus and arterial hypertension. Her current occupation is as a dishwasher in a restaurant. She informed us that the discoloration had appeared 2 months after starting her job (the association between humidity and *Pseudomonas* is known). Physical examination showed distal onycholysis and greenish discoloration of the nail plate (Fig. 1). Bacteriological culture of nail scrapings was positive for *Pseudomonas aeruginosa*. Fungal coinfection was excepted by potassium hydroxide preparation and culture. The clinical diagnosis was green nail syndrome caused by *P. aeruginosa* (chloronychia) or Fox–Goldman syndrome.

The chloronychia is a work-related illness of homemakers, hospital employees, and others often with wet fingers [1]. This malady is caused by *P. aeruginosa* and is characterized by onycholysis and greenish blue (chloronychia) or white (leukonychia) or red (retronychia) discoloration of the nail [1,2]. Our patient responded satisfactorily to oral ciprofloxacin. After 3 weeks, the nail plate returned to its normal coloration [3].

However, we should consider:

- Worker education is fundamental in the prevention of chloronychia
- Chloronychia is an occupational disease, caused by *P. aeruginosa*
- Chloronychia could be relayed by health-care workers.

### CONSENT FOR PUBLICATION

Written informed consent was obtained from patient for the publication of this case report and all associated images.



Figure 1: Persistent greenish pigmentation of the nail plate (chloronychia)

### AUTHORS' CONTRIBUTIONS


All authors contributed to the completion of this work. The final manuscript was read and approved by all authors

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**Correspondence to:** Gerardo Rivera-Silva, Department of Academic, School of Medicine, University of Monterrey, Monterrey, NL, Mexico. E-mail: gerardo.rivera@udem.edu

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