To the Editor: We read with great interest the brief communication by Lieberman, Grossman, and Silvers, which described 6 criteria for diagnosing subungual melanoma summarized by the letters ABCDEF. The E stands for extension of the brown or black pigment to involve the proximal or lateral nailfold (Hutchinson’s sign) or free edge of the nail plate. We report a case presenting with extension of pigment from the nailbed onto the hyponychium of the thumb in a patient who grew long fingernails and wore colored nail polish obscuring the nail plate.

A 54-year-old black woman had discoloration on her right thumbnail and hyponychium of 2 years’ duration. Thirty years earlier, she had initially noticed a longitudinal pigmented streak in the nail, which gradually spread over time. As she had always worn nail polish, she was not concerned about the appearance of the affected thumbnail nor was it noted by any physicians. On initial examination, she had an irregularly defined 8-mm black pigmented macule on the distal right thumb. The pigment was only visible by examining the volar skin under the free edge of her thumbnail because all of her nails including the affected thumbnail were entirely covered with colored nail polish obscuring the nail plate.

The nail plate was avulsed. A punch biopsy specimen from the nail bed showed a proliferation of single melanocytes at the dermoepidermal junction and slightly above it. Numerous melanophages were seen. A punch biopsy specimen from the volar skin at the distal nailfold showed acral skin with a proliferation of atypical melanocytes arranged predominantly as single cells and irregular nests at the dermoepidermal junction and above it, consistent with the diagnosis of melanoma in situ. A wide and deep excision of the distal thumb with skin grafting showed a very similar histologic picture to the punch biopsy specimens, which confirmed a diagnosis of malignant melanoma, predominantly in situ, with focal invasion of the nail bed, thickness of approximately 0.42 mm. The lesion extended from the nail matrix distally to the volar skin of the thumb. Mitotic figures were absent. No evidence of spread was noted at the time of surgery.

Extension of pigment onto the volar skin from the nail bed was useful to make a diagnosis of subungual melanoma in the patient. In patients whose nail plates are obscured by nail enamel, early diagnosis of subungual melanoma may be delayed. It may be impractical to ask all patients seen in a dermatology office to remove their nail polish for the purpose of a complete skin examination unless that is their presenting complaint. We submit that the extension of pigment onto the hyponychium from the nail bed should be included as a criterion for the diagnosis of subungual melanoma.

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REFERENCES

Muckle-Wells syndrome?

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