

Melanonychia blue lunula: result of hydroxyurea treatment

Abstract

Hydroxycarbamide is used in the treatment of Essential Thrombocytosis (ET) and other myeloproliferative disorders.¹ Melanonychia is one of the cutaneous abnormalities including nail changes that could develop with long-term treatment with hydroxycarbamide.² Women have a tendency to melanonychia secondary to hydroxycarbamide usage.³

Keywords: hydroxy urea, melanonychia, hydroxycarbamide, essential thrombocytosis

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Case study

Case 1: 49-year-old male patient diagnosed JAK-2^{V617F} positive

Polycythemia Vera. After 11 months of treatment with 1000mg/day Hydroxyurea (HU), blue lunula and longitudinal melanonychia was seen in fingers and face (Figure 1).



Figure 1 Melanonychia of the upper extremity hand-nails and face findings.

Case 2: 63-year-old female patient diagnosed JAK-2^{V617F} positive ET. After use of 1500mg/day HU in 4 months; blue-black pigment changes in bilaterally fingernails-blue lunula transverse melanonychia occurred. (Figure2). Patients were done to rule out other factors that cause melanonychia. After discontinued HU treatment, male patient's melanonychia findings regressed within 3 months, for female patients it was 4 months. Melanonychia induced by drugs can be caused by the activation of nail matrix melanocytes. It can present longitudinal, transverse or diffuse pigmentation in the nail plate.⁴ HU can rarely cause transverse and longitudinal melanonychia of both finger and toe nails. The occurrence of such a rare adverse effect with a common drug has prompted this report.

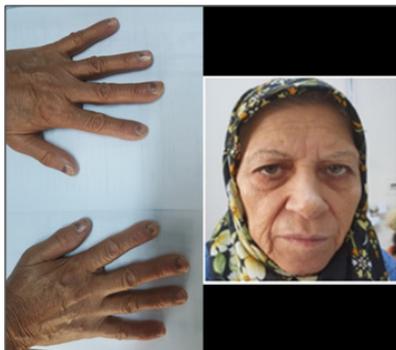


Figure 2 Blue lunula in nails and face findings.

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Conflict of interest

The author declares no conflict of interest.

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