

LETTER TO THE EDITOR

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Reiter's Syndrome in a Patient with Polyarthritis and Nail Involvement

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ABSTRACT

An 8-year old boy with polyarthritis and nail involvement is presented in this report. Nail involvement in Reiter's syndrome is a rare condition that may include painless erythematous induration of the base of the nail fold; subungual parakeratotic scaling and thickening opacification, ridging of the nail plate.

Key word: Reiter's syndrome; Nail involvement

LETTER

Reiter's syndrome refers to a condition of inflammation involving synovium, ocular tissue and urethral tissue, the result triad of arthritis, conjunctivitis and urethritis. The incidence of Reiter's syndrome in childhood is unknown, but it appears to occur with less frequency than adulthood. However the condition is likely to be under diagnosed, as the clinical findings may be subtle and occur in sequence over a period of weeks.¹ Reiter's syndrome is strongly associated with the HLA-B₂₇.¹⁻³

The patient was an 8-year- old that was hospitalized because of polyarthritis. Arthritis had begun from 5-days ago, at the first, right knee was involved, then progress to the left knee and right ankle (additive form). He had large swelling of the knee and ankle, sever tenderness and unable to walking.

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He had conjunctivitis 10 day's ago that treated out patiently with sulfacetamide.

On the fifth day of admission, we found white lesion on the third nail of right hand due to thickening of the nail (Figure1).

This opacifity under the nail became more prominent during next days and after three weeks he lost that nail.

Nail involvement in Reiter's syndrome has been reported in rheumatology and dermatology references. Some times all of the nail may be involved (terry nails).

The nails can become thickened and lifts from their nail beds.⁴ Terry nail is the term used to describe the condition when the nail shows a white discoloration due to changes in the nail bed but this discoloration suddenly stops 1–2 mm from the distal edge and this distal area of the nail shows a normal pink color.

These changes occur usually in all nails but sometimes when there aren't any renal or liver involvement may occur in only several nails with painless erythematous induration of the base of the nail fold; subungual parakeratotic scaling; and thickening, opacification, or ridging of the nail plate.⁵



Figure 1. White lesion on the third nail of right hand due to thickening of the nail.

On the fifth day of admission, we found white lesion on the third nail of right hand due to thickening of the nail. After three weeks of therapy the nail begun to separation of its bed. We treated the patient with NSAID (naproxen) and after one day therapy the swelling and tenderness of the joints were diminished.

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