

[PICTURES IN CLINICAL MEDICINE]

Beau's Lines and Leukonychia in a COVID-19 Patient

Satoshi Ide^{1,2}, Shinichiro Morioka^{1,2}, Makoto Inada¹ and Norio Ohmagari^{1,2}

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Picture.

A previously healthy 68-year-old Japanese man working in a fish market presented with fever and dyspnea at our hospital. He was then hospitalized after having been diagnosed with coronavirus disease (COVID-19). As the patient experienced mild hypoxemia, he was administered hydroxychloroquine 400 mg/day for 7 days and methylprednisolone

0.5 mg/kg/day for 5 days. Neither malnutrition nor hypocalcemia were observed during his 18-day hospital stay. In the outpatient follow-up one month after discharge, he reported white horizontal nail striae and sunken nails (Picture), which were clinically defined as leukonychia and Beau's lines. Periungual desquamation, which is well known as pediatric inflammatory multisystem syndrome in children (1), is one of the clinical presentations of COVID-19. Further, both Beau's lines and leukonychia have been reported to be associated with Kawasaki disease (2). Because COVID-19 and Kawasaki disease share similar extreme inflammatory responses, nail abnormalities may also be a significant clinical presentation of COVID-19.

The authors state that they have no Conflict of Interest (COI).

References

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¹Disease Control and Prevention Center, National Center for Global Health and Medicine, Japan and ²Emerging and Reemerging Infectious Diseases, Graduate School of Medicine, Tohoku University, Japan

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Correspondence to Dr. Satoshi Ide, side@hosp.ncgm.go.jp

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