It is not always the nail biting experience

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Citation
Kanjwal K. It is not always the nail biting experience Online J Health Allied Scs. 2008;7(4):10

URL
http://www.ojhas.org/issue28/2008-4-10.htm
Submitted: Oct 23, 2008; Accepted: Jan 12, 2009 Published: Feb 25, 2009

Abstract:
Case of a 22 year old male with past medical history of attention deficit disorder, found to have callosities and skin abrasions on knuckles and dorsum of his interphalangeal joints in both hands

Key Words: Attention deficit disorder, Nail bite
Case Report:
22 year old male with past medical history of attention deficit disorder, was seen in the electrophysiology clinic for palpitations. His physical examination was unremarkable except for his hand examination (Fig 1 and Fig 2). He had callosities and skin abrasions on knuckles and dorsum of his interphalangeal joints in both hands.

However, on further questioning our patient revealed that he is a habitual hand bitter and usually bites his knuckles and dorsum of his interphalangeal joints. Treatments for the conditions rely on psychotherapy, medication, or both. Behavior modification is quite important and is employed. Habits are generally milder but may be indistinguishable from compulsions.

Figure 1: Bite marks on dorsum of interphalangeal joints

Figure 2: Hypertrophy and redness of skin on the dorsum of interphalangeal and metacarpophalangeal joints