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V and I nails

The medical lines ConscrizioniMuehrcke are other names leukonychia of leukonychia Striped Muehrcke or the Muehrcke lines (leukonychia apparent Streaky) nell'ungelo are changes that can be a sign of an underlying medical condition. The term refers to a set of one or more pale transverse bands that extend to the bottom of the nail, parallel to Lunula. In contrast to the lines of Beau, are not fluted (no three-dimensional deformity), and in contrast to the Mees lines, the thumb is usually not involved. [1] [2] The Muehrcke dell'ipoalbuminemia Lines are a strong indicator that can result from a variety of different causes. [3] [4] The lines are actually in the vascular bed under the nail plate. As such, they do not move with the growth of the nails and disappear when the pressure is applied to the nail (the blanching of the underlying nail bed): This distinguishes them from "true leukonychia striata" such as Mees lines. [1] As in the nails Terry and a half and a half, it is thought that the model is considered formed by localized edema bands that put pressure on surrounding capillaries. [3] [5] The appearance of Physiology Muehrcke lines is associated with specifically marked hypoalbuminemia (serum albumin À ē à ˆ 2.2 g / dl), which indicates a decrease in protein synthesis, which can occur during periods of metabolic stress (eg. systemic infection, trauma, AIDS, chemotherapy) or in the United ipoalbuminici as nephrotic syndrome or the lack of dietary protein à ē. They are also seen in patients with renal disease finals sull'emodialisi, Hodgkin's disease, pellagra and anemia of falche cells. [3] [6] [7] [8] [9] The lines remain visible until the protein intake à ē is inadequate or the synthesis is impaired, and should disappear on the way back to the function normal. [3] In extreme conditions, the Muehrcke lines can also result from physical changes in the peripheral circulation: a case study reported appearance of the lines in a healthy argument after rising to 8,848 meters (29,029 ft) on Mount Everest. [10] The history of Muehrckke lines have been described by the American doctor Robert C. Muehrcke (1921 "2003) in 1956. In a study published in BMJ, examined patients with known chronic hypoalbuminemia and healthy volunteers, finding that ' appearance of more transverse white lines in a was highly specific marker for the low serum albumin (no subject with the sign was of more than 2.2 g / dl), it was associated with severity of the underlying condition and disappeared on the treatment of success (corticosteroids in the nephrotic syndrome) or HSA direct infusion. [4] See also the Mees lines À ē ˆ " a similar appearance, but the lines are in the nail and move as the nail grows half and half nails nail Terry's list of cutaneous conditions references ^ ab rapini, ronald p .; Bologna, Jean l .; Jorizzo, Joseph L. (2007). Dermatology: set of 2 volumes. St. Louis: Mosby. IsbnÀ, 978-1-4160-2999-1. ^ Zaia, Martin n .; Walker, Ashley (September 2013). "Nail abnormalities associated with systemic diseases". Clinics in dermatology. 31 (5): 627 À ē ˆ "649. DOI: 10.1016 / J.ClinderMatol.2013.06.018. ISNLÀ 1879-1131. PMID 24079592. ^ abcd Singal, Archana; Arora, Rahul (2015). "Fingernail as a window of systemic diseases. "Indian Dermatology online Journal. 6 (2): 67 À ē ˆ "74. DOI: 10.4103 / 2229-5178.153002. ISNLÀ 2229-5178. PMC 4375768. PMID 25821724. ^ a b muehrckke rc (June 1956). "The nails of fingers in chronic ipoalbuminaemia; a new physical sign." BR Med J. 1 (4979): 1327 À ē ˆ "8. DOI: 10.1136 / BMJ.1.4979.1327. PMC, 1980060. 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Muehrcke lines of nail nails of the nails of the nails Uneerce of emeanicine nails recovered by " medical conditioner's nailsterryxpecialtyinternal medicine, dermatology desire method physicodyptodyptification diagnosis deficiency, cirrhosis, diabetes mellitus, congestive heart failure , hyperthyroidism or malnutritionTrimentoDiretta at the basic conditions of Terry's nails is a condition And physics in which the nails or nails of a person's feet [1]: 659 appear white with a characteristic "earth glass" appearance without any Lunula. [2] The condition is expected to be due to a decrease in vascularization and an increase in connective tissue inside the col. [3] It frequently occurs in setting hepatic impairment, cirrhosis, diabetes mellitus, congestive heart failure, hyperthyroidism or malnutrition. Eighty percent of patients with severe liver disease has nails of the territory, but are also found in people with renal impairment, in patients with congestive heart failure [4] and are described as a brown arch near the ends of nails. [5] The recognition of characteristic nails models, such as Terry's nails, can be a useful araldo for early diagnosis of systemic diseases. [4] This result was named for Richard Terry. [6] See also the list of skin conditions References ^ FreeBerg, et al. (2003). Fitzpatrick dermatology in general medicine. (6 À ˆ ed.). McGraw-Hill. IsbnÀ, 0-07-138076-0. ^ Stulberg, Daniel L.; Linford, Sean; Fawcett, Robert S. (2004-03-15). "Nail knottledge: clues to systemic disease - March 15, 2004". American family doctor. 69 (6): 1417 - 1424. ^ Rapini, Ronald P.; Bologna, Jean L.; Jorizzo, Joseph L. (2007). Dermatology: Set of 2 volumes. St. Louis: Mosby. P. 1029. IsbnÀ, 978-1-4160-2999-1. ^ a b nia are; Ederer, s.; Dahlem, km; Gassanov, N; ER, F (July 2011). 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