

Bitten to the bone: A case of anxiety-induced osteomyelitis

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Case Report Abstract

Background

Onychophagia is a habitual nail-biting disorder, usually associated with mental or emotional diseases. It affects 20–30% of the population in all age groups. Human bites have the potential to become serious injuries due to high virulence in the human oral flora and may often require hospital admission, antibiotics and even debridement in the operating room. Thus, repetitive nail biting has the potential to be limb-threatening if not treated early and appropriately.

Case Presentation

Patient is a 49-year-old gentleman with a past medical history of severe refractory anxiety treated with hydroxyzine and scheduled alprazolam, after failing multiple other treatments, who was admitted to the hospital due to cellulitis of the right third digit after failing outpatient antibiotic therapy. On the initial physical exam, the patient had a lack of fingernails and multiple wounds at various stages of healing across all digits. The distal and middle phalanges of the 3rd right digit showing increased erythema and swelling and band tightening. Patient was started on broad spectrum antibiotics. Initial Xray of the right hand was concerning for osteomyelitis which was later confirmed with Magnetic Resonance Imaging (MRI). Infectious disease agreed on a course of cefepime, vancomycin and metronidazole. Hand surgery did not see a need for amputation initially though patient did require fasciotomy of the flexor compartment of the right middle finger at day 6 of admission due to slow recovery. Hand surgery however was not convinced patient would make meaningful recovery and advocated for amputation of finger, but patient decided to continue non operative treatment. He was discharged to a skilled nursing facility where he was to continue intravenous antibiotics for 4 more weeks.

Conclusion

The vulnerable patient population of south Texas is predominately Hispanic, Spanish-speaking and uninsured. It is imperative to treat psychiatric disorders early to prevent complications, however, given the few numbers of psychiatrist in the Rio Grande Valley and even fewer who speak Spanish it is not unusual find an appointment in more than 6 months out. In this case, we observe the limb-threatening complications a simple “bad habit” can lead to if not treated early and appropriately.

Keywords: Osteomyelitis, anxiety, psychiatry, Rio Grande Valley