

Case Report

Macroductyly of Toes in a Developing Community

Wilson Onuigbo^{1*} and Frank Akpuaka²

¹Department of Pathology, Medical Foundation and Clinic, Nsukka Lane, Enugu, Nigeria

²Department of Plastic Surgery, National Orthopaedic Hospital, Enugu, Nigeria

Abstract

The study of macroductyly, which is defined as phalangeal enlargement of one or more toes usually apparent from birth, is important. The senior author (WO) is interested in the Reprint Request (RR) on which he has published 2 articles on this subject. Therefore, the findings in them are compared with cases seen among the Ibos or Igbos who constitute one of the major ethnic groups domiciled mostly in the South-Eastern region of Nigeria. Authors deal in the article with data which are in line with those published materials.

Keywords: Epidemiology; Health education; Igbos; Macroductyly; Toes

Introduction

The Requested Reprint (RR) was not long ago a major form of scientific information. Incidentally, Swales [1], Editor of English for Specific Purposes, wrote concerning me thus: “the only active researcher that I have traced in the RR area.” In fact, my research revealed that RR is a “tracer tool” in documentation [2]. Therefore, what my mini-Library reveal concerning macroductyly?

Two reprints surfaced. Firstly, there was a case report of a 6-year-old Saudi girl whose fingers and toes were involved [3]. Secondly, not only 5 personal cases but also 40 from the literature were published [4]. Accordingly, I followed the tip of a UK group that a histopathology data pool suffices in epidemiological analysis [5]. I established such a pool among my own people, the Igbos [6], who constitute a major Ethnic Group in the South-Eastern Region of Nigeria. The present paper describes my experience in fishing for the local cases of macroductyly.

Materials and Methods

From 1970 to 2000, when I was the pioneer pathologist in the Regional Pathology Laboratory situated at Enugu, Nigeria, I kept

***Corresponding author:** Wilson Onuigbo, Department of Pathology, Medical Foundation and Clinic, Nsukka Lane, Enugu, Nigeria, Tel: +234 8037208680; E-mail: wilson.onuigbo@gmail.com

Citation: Onuigbo W, Akpuaka F (2016) Macroductyly of Toes in a Developing Community. J Cytol Tissue Biol 3: 010.

Received: May 09, 2016; **Accepted:** September 02, 2016; **Published:** September 15, 2016

careful records of cases submitted by several surgeons with the proviso that the specimens must be accompanied by well documented clinical data. Their analysis is the subject of this paper. Figure 1 is illustrative of this picturesque condition.



Figure 1: Macroductyly in right foot compared with the left.

Results

These have been tabulated here under as follows (Table 1):

S/N	Lab No	Initials	Age	Sex	Toe
1	B 610/76	MO	1	M	All
2	HU 436/83	EE	14	M	Little
3	H 302/84	EG	8	F	Big
4	UH 2816/87	EC	1	M	1st, 2nd
5	H 181/90	AI	20	F	Little
6	9209127	AU	9	M	All
7	921117	NH	25	F	Big
8	9312129	OJ	13	F	Big
9	9402196	OA	3	F	2nd - 4th
10	H 21/96	OC	11	M	3rd - 5th

Table 1: Results.

Discussion

This is done here with due reference to comparison with the 45 published RR cases [3]. All of them exhibited lipomatous constituents. Both male and female patients were equal in the ratio of 5 each. Unlike the published cohort with “noted soon after birth,” the local age ranged from a year to 25 years, averaging almost 10 years. This must be due to the state of underdevelopment of the community. It is necessarily an indication of the need for public health education. Elsewhere, it was shown how the community may benefit in general with such education in the fields of albinism [7,8]. Now, sunlight exposure causes skin cancer. Therefore, it is argued that statutory indoor employment is mandatory for these unfortunate citizens.

Acknowledgment

We are indebted to Mr. Edward Chukwuokeje for the photograph.

There is no Conflict of Interest.

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