

Reply to: “Nail photography— All 10 fingernails in 1 frame”

To the Editor: It is nice to know that our Pearl article¹ generated a response from another center. We appreciate the comments made by Inamadar and Palit² and went through their comments in detail. We had actually considered this as one of the possible methods for imaging nails but would like to put forth the following points regarding the method mentioned by them, which we hope will explain why we did not propose this as a standard technique for authentic documentation of the nails.

- As they have rightly pointed out, it is cumbersome for the patient to flex the inflamed finger to occupy the frame when photographed. In fact, even for a healthy thumb, the natural flexed position tends to hide the medial aspect of the thumbnail and the finger position mentioned by the authors is a bit uncomfortable for the patient.
- More than the flexion aspect, it is standardization that is compromised especially when images are taken as part of a follow-up evaluation, as it is very difficult for the patient to replicate the same position. Moreover, getting the same view from all observers, as in a multicentric study, may not be possible.
- We believe our method addresses all these issues and imaging can be done from anywhere, even by observers who have not seen or do not have access to the baseline image.
- We believe that our concept works very much like a template and can be adapted by even nonmedical people or technicians. Creating a collage is very easy and can be done when required using any simple photograph-editing software.
- To elaborate, we present 2 images: that of a patient with noninflammatory diseased fingernails imaged as described by Inamadar and Palit² (Fig 1), and as in our article¹ (Fig 2).

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Fig 1. All 10 fingernails in a noninflammatory condition affecting the nail imaged as described by Inamadar and Palit.



Fig 2. The same fingernails as in Fig 1, imaged as described in our article.¹

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