

Modifications of the skin and nails

(Les modifications de la peau et des ongles)

Some of the drugs used in chemotherapy and targeted therapies and radiotherapy may cause skin disorders:

- dry skin (split, cracked skin);
- hypersensitivity to the sun;
- stinging and itching in fingers and toes;
- flaking (peeling skin) and pain in the palms of the hands and the soles of the feet, known as hand-foot syndrome;
- darkening of the skin;
- redness of the skin similar to sunburn (erythema);
- little spots or pink plaques (acne and/or urticaria);
- modification of the colour and weakening of the nails which break easily, are striated and wavy and sometimes fall off;
- loss of suppleness of the skin and/or oedema (swelling with an accumulation of liquid in the treatment zone), particularly on a scar if surgery preceded radiotherapy;
- blotches which appear 18 months to two years after the end of radiotherapy. This is called telangiectasia. It consists in dilated small superficial blood vessels. This blotchy appearance is more severe if the irradiated zone is exposed to the sun.

Don't hesitate to tell your doctor when these disorders appear. Appropriate medical treatment can calm them.

Some tips to help you limit these skin disorders:

What you can do

- Apply moisturiser to your skin regularly and copiously, but never before a radiotherapy session;
- Use soft, alcohol-free soap (Marseille soap or superfat soap):



- Choose ample, soft clothes to be in contact with your skin (cotton, silk) rather than synthetic fibres;
- Wear comfortable, soft shoes;
- Wear protective gloves for gardening and housework.

For the nails:

- Have a manicure and pedicure before starting treatment if your hands and feet are already slightly damaged (corns);
- Cut your nails short to prevent them from cracking or lifting;
- Wear cooling gloves or socks suggested by the medical team;
- The day of the chemotherapy session or the day before, apply two coats of silicon nail varnish (sold in the pharmacy) then two layers of dark, non-nacre varnish. Keep the varnish throughout the duration of treatment. If it flakes, remove it with an acetone-free dissolvent and renew the four layers.
- You can also use solutions to protect varnish-free nails, sold in the pharmacy.



Massage a scar to soften it. Lymphatic drainage performed by a specialist physiotherapist, or a puncture, may also be suggested in the event of oedema.

What you should avoid

- Exposing the hands and feet to heat (sun, hot baths, etc.):



- Protect yourself against the sun with total sunblock and a hat (exposure to the sun must often be limited during treatment and over the next year);
- Activities involving rubbing the skin or pressure on the hands (housework, driving, gardening, etc.);
- Adhesive dressings or tight bandages;
- Prolonged walking and running;
- Products containing alcohol (perfumes, lotions, deodorants etc.) or oily creams on the treated zone before radiotherapy. They promote superficial burning of the skin.

Certain light-sensitive medicinal products, because they cause particular sensitivity to solar radiation. This is why you must give the doctor a list of all the medication you take and do not take it without medical advice.

A beautician can advise you on how to prevent or best manage these skin modifications.



If, in spite of all this, your skin becomes red or sensitive, tell your doctor without waiting for the symptoms to grow worse. Painkillers or local treatments can bring relief.

