

Fingernail Delamination (EVA)

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Introduction

Fingernail delamination, also known as onycholysis, is separation of the fingernail from the underlying nail bed, usually associated with discoloration. Fingernail delamination in the setting of space flight occurs primarily after Extra Vehicular Activities (EVAs) due to repeated microtrauma to the finger tips and increased moisture within the glove. It is also seen during EVA training which takes place prior to the mission, in the Neutral Buoyancy Lab (NBL).^{[1][2][3]}

Clinical Priority and Clinical Priority Rationale by Design Reference Mission

One of the inherent properties of space flight is a limitation in available mass, power, and volume within the space craft. These limitations mandate prioritization of what medical equipment and consumables are manifested for the flight, and which medical conditions would be addressed. Therefore, clinical priorities have been assigned to describe which medical conditions will be allocated resources for diagnosis and treatment. “Shall” conditions are those for which diagnostic and treatment capability must be provided, due to a high likelihood of their occurrence and severe consequence if the condition were to occur and no treatment was available. “Should” conditions are those for which diagnostic and treatment capability should be provided if mass/power/volume limitations allow. Conditions were designated as “Not Addressed” if no specific diagnostic and/or treatment capability are expected to be manifested, either due to a very low likelihood of occurrence or other limitations (for example, in medical training, hardware, or consumables) that would preclude treatment. Design Reference Missions (DRMs) are proposed future missions designated by a set of assumptions that encompass parameters such as destination, length of mission, number of crewmembers, number of Extravehicular Activities (EVAs), and anticipated level of care. The clinical priorities for all medical conditions on the Exploration Medical Condition List (EMCL) can be found here (https://humanresearchwiki.jsc.nasa.gov/index.php?title=Category:All_DRM). The EMCL document may be accessed here (https://humanresearchwiki.jsc.nasa.gov/images/6/62/EMCL_RevC_2013.pdf).

Design Reference Mission	Clinical Priority	Clinical Priority Rationale
<p>Lunar sortie mission</p> <p>Assumptions:</p> <ul style="list-style-type: none"> ▪ 4 crewmembers (3 males, 1 female) ▪ 14 days total ▪ 4 EVAs/ crewmember ▪ <u>Level of Care 3</u> 	<p>Shall</p>	<p>Multiple EVAs will be conducted during a lunar sortie mission, and the likelihood of fingernail delamination is expected to be high. Therefore, treatment shall be manifested.</p>
<p>Lunar outpost mission</p> <p>Assumptions:</p> <ul style="list-style-type: none"> ▪ 4 crewmembers (3 males, 1 female) ▪ 180 days total ▪ 90 EVAs/ crewmember ▪ <u>Level of Care 4</u> 	<p>Shall</p>	<p>Multiples EVAs will be conducted during a lunar outpost mission, and the likelihood of fingernail delamination is expected to be high. Therefore, treatment shall be manifested.</p>
<p>Near-Earth Asteroid (NEA) mission</p> <p>Assumptions:</p> <ul style="list-style-type: none"> ▪ 3 crewmembers (2 males, 1 female) ▪ 395 days total ▪ 30 EVAs/ crewmember ▪ <u>Level of Care 5</u> 	<p>Shall</p>	<p>Multiple EVAs will be conducted during Near Earth Asteroid (NEA) proximity operations, and the likelihood of fingernail delamination is expected to be high. Therefore, treatment shall be manifested.</p>

Initial Treatment Steps During Space Flight

A link is provided to a prior version of the International Space Station (ISS) Medical Checklist, which outlines the initial diagnostic and treatment steps recommended during space flight for various conditions which may be encountered onboard the ISS. Further diagnostic and treatment procedures beyond the initial steps outlined in the Medical Checklist are then recommended by the ground-based Flight Surgeon, depending on the clinical scenario. Please note that this version does not represent current diagnostic or treatment capabilities available on the ISS. While more recent versions of this document are not accessible to the general public, the provided version of the checklist can still provide a general sense of how medical conditions are handled in the space flight environment. Medical Checklists will be developed for exploration missions at a later point in time.

Please note this file is over 20 megabytes (MB) in size, and may take a few minutes to fully download.

ISS Medical Checklist (http://www.nasa.gov/centers/johnson/pdf/163533main_ISS_Med_CL.pdf)

Capabilities Needed for Diagnosis

The following is a hypothetical list of capabilities that would be helpful in diagnosis. It does not necessarily represent the current capabilities available onboard current spacecraft or on the ISS, and may include capabilities that are not yet feasible in the space flight environment.

- Imaging capability (such as a camera)

Capabilities Needed for Treatment

The following is a hypothetical list of capabilities that would be helpful in treatment. It does not necessarily represent the current capabilities available onboard current spacecraft or on the ISS, and may include capabilities that are not yet feasible in the space flight environment.

- Dermabond applicator
- Bacitracin antibiotic ointment
- Band-aids
- Analgesics (non narcotic, oral)

Associated Gap Reports

The NASA Human Research Program (HRP) identifies gaps in knowledge about the health risks associated with human space travel and the ability to mitigate such risks. The overall objective is to identify gaps critical to human space missions and close them through research and development. The gap reports that are applicable to this medical condition are listed below. A link to all of the HRP gaps can be found here (<http://humanresearchroadmap.nasa.gov/Gaps/>).

2.01 - We do not know the quantified health and mission outcomes due to medical events during exploration missions.

2.02 - We do not know how the inclusion of a physician crew medical officer quantitatively impacts clinical outcomes during exploration missions.

3.01 - We do not know the optimal training methods for in-flight medical conditions identified on the Exploration Medical Condition List taking into account the crew medical officer's clinical background. (Closed)

4.01 - We do not have the capability to provide a guided medical procedure system that integrates with the medical

system during exploration missions.

4.07 - Limited wound care capability to improve healing following wound closure (Closed)

4.08 - We do not have the capability to optimally treat musculoskeletal injuries during exploration missions.

4.14 - We do not have the capability to track medical inventory in a manner that integrates securely with the medical system during exploration missions.

4.15 - Lack of medication usage tracking system that includes automatic time stamping and crew identification

4.24 - Lack of knowledge regarding the treatment of conditions on the Space Medicine Exploration Medical Condition List in remote, resource poor environments (Closed)

5.01 - We do not have the capability to comprehensively manage medical data during exploration missions.

Other Pertinent Documents

List of Acronyms

D	
DRM	Design Reference Mission
E	
EMCL	Exploration Medical Condition List
EVA	Extravehicular Activity
I	
ISS	International Space Station
M	
MB	Megabyte
N	
NBL	Neutral Buoyancy Lab
NEA	Near Earth Asteroid

References

1. Strauss S. Extravehicular Mobility Unit Training Suit Symptom Study Report. NASA; 2004 Jun. Report No.: NASA/TP-2004-212075.
2. Opperman RA, Waldie JM, Natapoff A, Newman DJ, Jones JA. Probability of spacesuit-induced fingernail trauma is associated with hand circumference. Aviat Space Environ Med. 2010 Oct;81(10):907-13.
3. Viegas SF, Williams D, Jones J, Strauss S, Clark J. Physical demands and injuries to the upper extremity associated with the space program. J Hand Surg Am. 2004 May;29(3):359-66.

Last Update

This topic was last updated on 8/12/2014 (Version 2).

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Category: Medical Conditions

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