

Up-Close

A Look at Dermatologic Diagnoses

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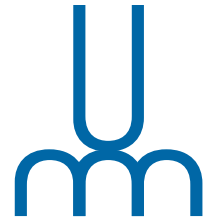


Figure 1. White moist patches between toes.



Figure 2. Annular scaling patch on sole of foot.

Tinea Infections

Differential Diagnosis

Superficial dermatophyte infections, or ringworm, are classified according to the body part involved. Tinea pedis involves the feet, tinea manuum the hands, tinea cruris the groin, tinea capitis the hair, while tinea unguium involves the nail (onychomycosis) and tinea corporis the entire body.

Interdigital tinea pedis may have dry scales or moist white patches, often the latter have gram negative bacteria (Figure 1). Tinea pedis may present as the classic moccasin foot with diffuse dry scales on the plantar surface, and may show the typical two-foot, one-hand distribution. Tinea pedis may also present in an annular form or vesicular form, typically on the medial plantar surface (Figure 2). *Trichophyton rubrum*, *Trichophyton mentagrophytes*, and *Epidermophyton floccosum* are common pathogens.

Treatment

If dermatophyte infection is limited to the skin and the nails are spared, use topical treatment with an imidazole, such as ketoconazole daily, ciclopirox *bid*, allylamines terbinafine or naftifine for one month.

Caution should be used in public changing areas. In addition, antifungal powders and daily soaking of the foot in water with a capful of javex and drying the affected area thoroughly may reduce recurrence. [CME](#)