

## Pictorial CME

### Rash on the Face

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This 11 year old girl presented to the OPD with this rash on her face. Her mother said that this rash had been present for the last three months. She had been treated for acne and Seborrhic dermatitis. But the rash is persistent and she has burning sensation when going out in the sun.



#### Questions :

- (1) What is the probable diagnosis?
- (2) What is the treatment of this condition?
- (3) What is the aetiology of this disease?

#### Editor's Comment :

- Tinea can have myriad presentations
- Presently in India, dermatophyte infections have become notoriously recalcitrant.
- Excess animal contact is one of the reasons of Tinea corporis

#### Answers :

- (1) This facial skin patch, with a clear expanding scaly border, is most suggestive of Tinea (Tinea Faciei)
- (2) Treatment of Tinea is by anti-fungals, topical or oral, singly or in combination. Presently, in India, there is widespread resistance to single antifungals and thus, dual therapy has to be used. Topical preparations include creams of azoles like Clotrimazole (1%) or Sertaconazole (2%), Allylamines like Terbinafine or other drugs like Amorolfine. Oral drugs include terbinafine, Griseofulvin or Fluconazole. Of them, some like

- (3) Fluconazole are used once weekly while others like Terbinafine are to be taken daily. Duration of therapy is generally taken as 4—6 weeks. But recently in India, dermatologists had to use prolonged therapy and higher doses.
- (3) Infection caused by dermatophytes: fungi multiplying within keratinized tissue. Three main groups are Trichophyton, Epidermophyton and Microspora. Some of these are Zoophilic fungi and are transmitted to humans by animals like cattle, dog or pet Guinea Pigs.

#### REFERENCES

- 1 Baumgardner DJ — Fungal infections from human and animal contact. *J Patient Cent Res Rev* 2017; 4: 78-89.

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