CASE REPORT

Modified Tinea – A Mithering Problem

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ABSTRACT

Eberconazole has an anti-inflammatory effect and in our experience, also has a better role in managing steroid-modified and facial lesions. Eberconazole has a better role in clearance of the lesions. In these 5 cases of tinea infections, treatment with eberconazole helped in attaining favorable outcomes.

Keywords: Tinea, steroids, eberconazole

Tinea barbae and tinea incognito are increasingly becoming common due to the rampant misuse of steroid combinations. We herewith present 5 cases with history of using steroids on the affected areas.

CASE 1

A 45-year-old male patient presented with multiple follicular papules to pustules over the beard region (Fig. 1) and had been treated as folliculitis by a general practitioner and he had approached us after failure of therapy. The lesion was itchy. As the patient was a sales executive and had to meet people, he had to shave daily which became very difficult for him.

He was diagnosed as tinea barbae and was started on capsule itraconazole 100 mg twice daily for 1 week and also on topical eberconazole. He responded after 3 weeks of therapy and got excellent response. His lesions disappeared by the end of 1 month, had no relapse after stopping the therapy.

CASE 2

A 52-year-old male presented with boggy swelling on his moustache area (Fig. 2). He was prescribed a steroid combination of clobetasol, gentamicin and clotrimazole preparation by a general practitioner and had remissions on using these creams.

Scrapings for potassium hydroxide (KOH) mount demonstrated hyphae and we started him on eberconazole. He responded at the end of 5th week. He had no relapse on follow-up until 4th month.

CASE 3

A 35-year-old male had come to the Dermatology Department with complaints of itching, and papules on the back since 5 months. He had been going to many general practitioners who have been prescribing steroid combinations.

On examination, he had papules with crusts and at the edges, had ill-defined margins and few areas of central clearing were visible (Fig. 3).

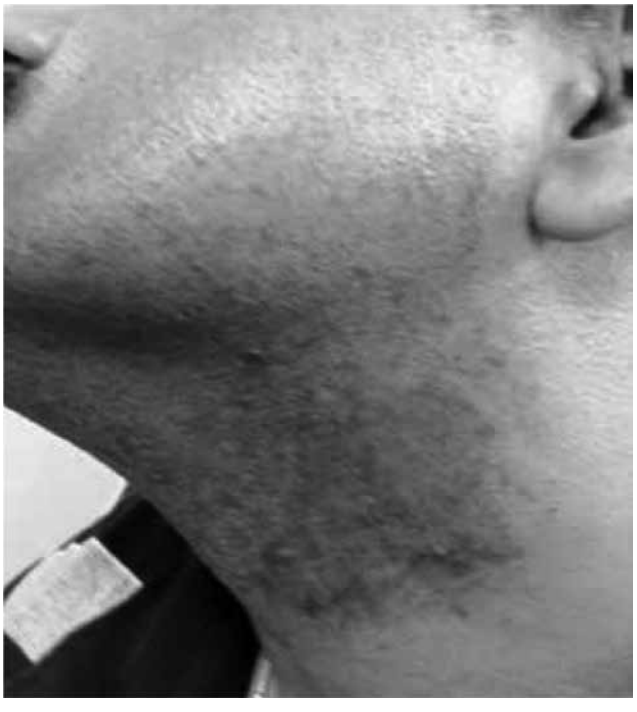

Figure 1. Multiple follicular papules to pustules over the beard region.

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A KOH mount was done which revealed hyphae. The patient was diagnosed with tinea corporis and prescribed tablet terbinafine 250 mg a day for 10 days and topical eberconazole.

He responded in 2 weeks and was asked to continue the topical therapy for 2 months for morphological clearance.

We did a repeat KOH mount and found no hyphae. Patient had no relapse after 6 months.

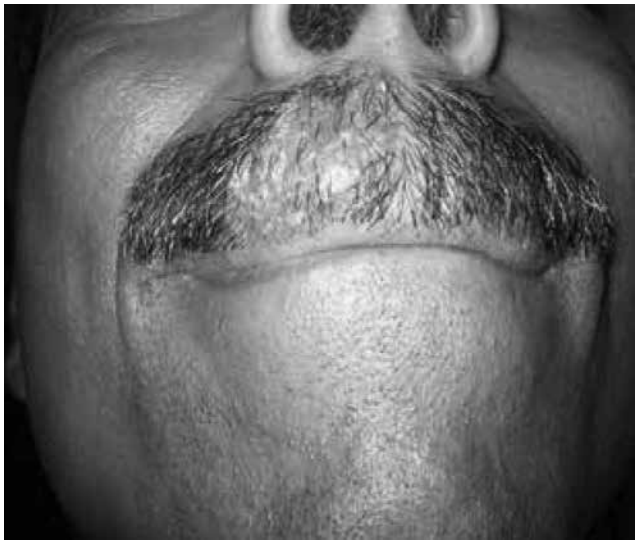

Figure 2. Boggy swelling over the moustache area.

Figure 3. Papules on the back.

CASE 4

A 19-year-old male, working in hotel industry, presented with itchy papules on the forearm. On initial examination, we presumed it to be polymorphous light eruption. But on closer inspection, we could elicit an ill-defined border over the wrist (Fig. 4).

On examination and probing the history, we found he had lesions all over the body for which he was applying "sapat malam", a local quack preparation, and did not get any results.

He was started on tablet griseofulvin (as the patient could not afford) 250 mg every day for 2 months and eberconazole topically. He responded by the end of 3 months and had no relapse after 5 months.

CASE 5

A 27-year-old male working as a driver had presented with itchy, scaly and diffuse patches over the face. He was treated as allergic contact dermatitis with systemic steroids.

On examination, he had a well-defined erythematous border on the face extending to the ears and back of the ears. KOH revealed fungal hyphae.

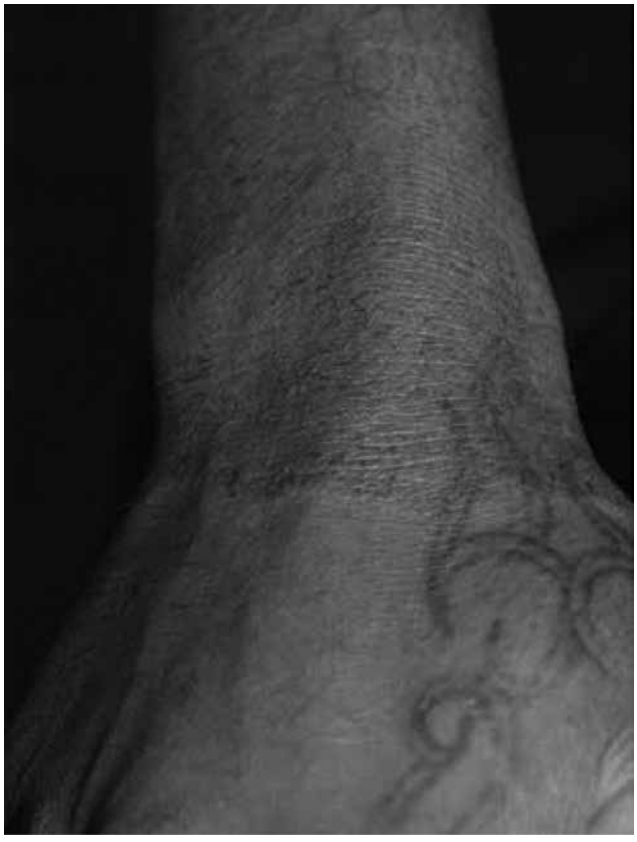

Figure 4. Ill-defined border over the wrist.

He was started on tablet terbinafine and eberconazole topically which led to significant improvement in the lesions.

DISCUSSION

In all these 5 cases, we had started eberconazole topically. Though we had prescribed various oral antifungal therapies, we found local applications to augment the results for clinical clearance.

Eberconazole is a topical imidazole with a mode of action similar to that of other azole antifungals, which is, inhibition of fungal lanosterol 14α-demethylase.[1,2]

This drug is effective and has a good safety profile. The duration of therapy depends on the area involved.

REFERENCES

1. Fernández-Torres B, Inza I, Guarro J. In vitro activities of the new antifungal drug eberconazole and three other topical agents against 200 strains of dermatophytes. J Clin Microbiol. 2003;41(11):5209-11.
2. del Palacio A, Ortiz FJ, Pérez A, Pazos C, Garau M, Font E. A double-blind randomized comparative trial: eberconazole 1% cream versus clotrimazole 1% cream twice daily in Candida and dermatophyte skin infections. Mycoses. 2001;44(5):173-80.

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Valneva COVID-19 Vaccine Found Effective in Trial

The Valneva COVID-19 vaccine was found to work well at stimulating the immune system to fight the SARS-CoV-2 virus in a phase 3 trial.

Volunteers who received the vaccine were found to have high levels of neutralizing antibodies against the virus. The vaccine outperformed the AstraZeneca shot on this parameter in head-to-head studies. This is an inactivated whole virus vaccine.

Valneva stated that its vaccine had a neutralizing antibody seroconversion rate of over 95% and there were no severe cases of COVID-19 seen in the trial, in spite of variants like Delta being in circulation… (*Source: BBC*)

New Migraine Drugs Tied to Less Risk for Adverse Events

According to a new systematic review and meta-analysis, new classes of antimigraine drugs appear to be effective and have improved tolerability among patients with chronic migraine.

Investigators compared the outcomes for acute migraine management using lasmiditan (a 5-hydroxytryptamine [5HT]1F-receptor agonist), and gepants - rimegepant and ubrogepant (calcitonin gene-related peptide [CGRP] antagonists) - with standard triptan (selective 5-HT1B/1D-receptor agonist) treatment. The analysis included 64 double-blind randomized clinical trials with 46,442 patients.

Virtually all medications with extensive clinical use were linked with higher ORs for freedom from pain when compared with placebo. In comparison with ditan and gepants, triptans were linked with significantly higher ORs for pain freedom, with the OR ranges being 1.72-3.40 for lasmiditan, 1.58-3.13 for rimegepant and 1.54-3.05 for ubrogepant. In terms of pain relief at 2 hours, triptans were found to be tied to higher ORs in comparison with other drug classes. The paper is published online in *JAMA Network Open*… (*Source: Medscape*)

Dupilumab Linked to Improved Lung Function in Children with Asthma

Findings from a randomized study, presented at the CHEST conference, the annual meeting of the American College of Chest Physicians, revealed that children with uncontrolled, moderate-to-severe asthma had better lung function over the long-term when they received treatment with dupilumab.

In the study, use of add-on dupilumab in children ages 6 to 11 years appeared to improve forced expiratory volume in 1 second (FEV1) by a prebronchodilator average of 0.06 liters at week 2, compared to placebo ($p = 0.025$), and by an average of 0.17 liters at week 52 ($p < 0.0001$), noted researchers. There were similar benefits in post-bronchodilator FEV1 (mean difference of 0.09 liters at week 52, compared to placebo; $p = 0.015$).

Investigators, therefore, noted that dupilumab was associated with significant, rapid and persistent improvements in several aspects of lung function in kids 6 to 11 years of age… (*Source: Medpage Today*)

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