

Athlete's Foot



Tinea Pedis *Athlete's foot (also called tinea pedis or ringworm of the foot) is a common fungal infection. It affects the skin between the toes, causing redness, itching, oozing, and peeling. It also may appear on the soles and spread up the sides of the feet. Athlete's foot fungus is contagious and spreads easily in moist environments, such as shower floors, or through the sharing of wet towels.*

Most cases of athlete's foot can be treated at home with nonprescription antifungal medication applied to the affected area daily as directed. To prevent recurrence, antifungal medications should be continued for 1 to 2 weeks after the infection has cleared up.

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continued 

People With Diabetes or Poor Immunity Are at Greater Risk

Athlete's foot is caused by the same type of fungus that causes jock itch and ringworm of the scalp and skin. It can spread from person to person or to different areas of the same person, including the toenails; the skin on the fingers and hands also may be affected.

How This Fungal Infection Develops

Fungus grows easily in warm and moist areas on the surface of the skin, often where skin touches skin or where perspiration occurs. The feet are especially vulnerable to fungal infections because they are often moist or clothed in vinyl or rubber-soled shoes that do not allow air to circulate. Bare feet often come in contact with areas where fungus grows, such as showers, locker-room floors, and swimming pools. People with diabetes or poor immunity are more likely to develop athlete's foot.

Symptoms and Diagnosis

The symptoms of athlete's foot usually include a red, itchy rash on the foot and cracked, peeling skin between the toes. The fungus also may develop on the soles of the feet, resulting in soreness, and thickened, cracked skin may spread up the sides of the feet. Small, fluid-filled blisters may form on the skin's surface; these break open and crust over, leaving the area prone to bacterial infection. The infection can spread to the toenails, which may thicken and crumble.

Doctors often diagnose athlete's foot by examining the skin and reviewing the patient's symptoms. A sample of skin scrapings viewed under a microscope can confirm the fungal infection, or the sample may be sent to a laboratory for evaluation.

Treatment and Prevention

Mild cases of athlete's foot can be treated with nonprescription antifungal medications such as clotrimazole, miconazole, terbinafine, tolnaftate, and undecylenic acid. These products come in a wide array of forms, including creams, lotions, gels, ointments, powders, and sprays. For successful treatment, these products must be used according to the directions given on the package. If a nonprescription medication does not eliminate the infection, prescription antifungal products for the skin (for example, clotrimazole and naftifine) are available, as well as medications to take by mouth (for example, fluconazole, itraconazole, and terbinafine).

There are several ways to speed healing during treatment. The feet should be washed with mild soap and water twice daily. In addition, some healthcare professionals recommend foot soaks in an astringent (drying) solution of aluminum acetate (Domeboro or Burow's solution). The feet should be dried carefully after washing, especially between the toes. Keep moisture away from the feet by wearing absorbent cotton socks, changing them regularly, and alternating pairs of shoes to allow them to dry thoroughly between wearings. Keeping the feet dry is important, because fungus thrives in warm, moist places.

Once the infection is eliminated, future infections can be prevented by continuing to keep the feet dry. Applying talc or antifungal foot powder daily, wearing breathable shoes and cotton socks, and using shower sandals in public areas with moist floors, such as locker-room showers or swimming pools, are all ways to protect against athlete's foot infections.

Be sure to ask your pharmacist for help in selecting the right medication for the treatment of athlete's foot.



With its distinctive appearance, athlete's foot is often diagnosed by a simple examination of the affected skin.