



INFECTIOUS DISEASES (BACTERIAL, FUNGAL, VIRAL, PARASITIC, INFESTATIONS)

TREATMENT OF FUNGUS—A NIGHTMARE IN INDIA.

Sudip Das⁽¹⁾ - *Nidhi Sharma*⁽²⁾

Wbmes, Calcutta National Medical College, Kolkata⁽¹⁾ - *Wbmes, Cnmch, Kolkata*⁽²⁾

INTRODUCTION - Dermatophytes are the most common cause of fungal infections worldwide, impacting millions of individuals annually in the setting of clinical non responsiveness after full dose of systemic antifungals in the INDIAN SUBCONTINENT. Despite the prominence of dermatophyte infection and their recurrence or clinical response to standard regimens was intriguing.

Objectives: - The objective of this study were to isolate and identify the causative agents of dermatophytoses from the different clinical samples such as skin, nail and hair collected among clinically suspected cases, attending dermatology OPD of our tertiary care hospital.

Materials and Methods: - One hundred patients were included in the study. The materials for the study were skin scrapings, hair pluckings and nail clippings. Skin scrapings were collected from the edge of the lesions with the help of scalpel blade. In Tinea capitis and Tinea barbae, hair was plucked along with the root with the help of forceps. In “black dot” in Tinea capitis, a scalpel was used to scrape scales and excavate small portions of the hair root. Nail clipping were taken in a case of clinically infected nail. Samples showing fungal hyphae in KOH preparation were further confirmed by culture in SDA. The dermatophytes were identified to species level with Lactophenol cotton blue preparation (LPCB) and other biochemical tests. Growths obtained were identified based on the colony morphology, microscopic appearance, urease test and hair perforation test.

Results:- Nineteen samples showed no fungal elements. 74 samples showed growth of fungus. Trichophyton was the predominant species seen in 49 patients. T. Rubrum was seen in 28 patients, followed by T. Verrucosum (12 patients) and T. Mentagrophytes was seen in 9 patients.

CONCLUSIONS:Maximum sensitivity was to Itraconazole (>85%) while least sensitivity was to Terbinafine (<26%). Luliconazole was the most effective topical anti-fungal (>82%).

