



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

TRICHOMYCOSIS AXILLARIS: REPORT OF A CASE

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Introduction: This is a superficial bacterial infection. Concretions yellow, black or red to adhere to axillary hair and clinically characterize axillaris Trichomycosis

Methods: Our observation concerns the teenager LN aged 14 .the patient complained of foul odor and sweating. The clinical examination revealed adherent yellowish concretions in the armpits. The review in the light of Wood showed a pale yellow fluorescence of infected hairs. The mycological sampling was negative. The diagnosis was retained Trichomycosis axillaris. A complete shaving the infected area has been proposed associated with clindamycin topically twice daily for 14 days The jujube is a corynebactériose Trichomycosis due to *Corynebacterium tenuis*. The clinical picture is characterized by a white engainement axillary hair, pubic rarely. This condition causes no fonctionnelle.cependant manifestation, patients may complain of bad smell their armpits Clinically, concretions, usually yellowish, prevails at the central area of the armpit .This insoluble substance seems to be developed by the bacteria can adhere and can destroy the cuticle and cortex of the hair keratin.the underlying skin is usually normal. The red and black color appears more common in tropical climates

Results: Shelley showed the coexistence of erythrasma and keratolysis punctuated with this disease: currently grouped under the term "triad corynebactérioses" or "corynebacterial triad". Rho and Kim demonstrated the presence of this triad in 13% according to a study of 842 Korean soldiers.The simplest treatment is to provide the complete shaving the infected area allowing instant cure the condition. Regular shaving prevent any future recurrence

Discussion: It may be followed by the antiseptic application. Hyperhidrosis associated can be treated.

Conclusion: Vinegary hot ablutions can be proposed to detach the bacterial clusters associated with the application of topical imidazole or application of clindamycin for a period that is not codified, the order of 15 days.

