

TROPICAL DERMATOLOGY

WHITE TINEA CAPITIS IN AN ELDERLY WOMAN

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Background: Tinea capitis (TC) is a hair infection due to dermatophytes, the most common isolated in adults include Trichophyton tonsurans, Microsporum canis. Although TC is common in children several studies have shown that, it is far from being rare in adults.

Observation: A 92-year old woman presented with a 2-year history of hair loss and itching. Physical examination revealed diffuse alopecia, with thinning of scalp hairs and follicular plugging. Trichoscopy showed corkscrew white hairs and comma hairs. Wood lamp examination showed negative fluorescence. KOH preparation revealed hyphae of scalp scale and endothrix large conidia. A biopsy demonstrate the endothrix pattern. Mycologic culture revealed Trichophyton tonsurans. The patient was treated with ketoconazole (2%) shampoo and terbinafine 250mg daily for 40 days, achieving clinical and mycological cure. Adult TC may have polymorphic and atypical clinical presentations, caused by T. tonsurans is usually an asymptomatic indolent disease, it often presents with mild perifollicular scaling and very little inflammation. Particularly in elderly, the diagnosis is complicated by the fact that there are not "black dots" and may present as alopecia or seborrheic form. Few studies have been addressed the correlation between trichoscopic findings and the diagnosis of TC. Comma and corkscrew hairs are considered a specific marker. Comma hairs have been hypothesized to represent cracking and bending of hyphae-filled hair shafts, while corkscrew are considered a variation of comma hairs in black patient hair types. Fungal infection management with oral antifungals such as terbinafine and azoles have the higher cure rates. Topical treatment should be use as an adjunct to systemic therapy.

Key message:

- Elderly tinea capitis is rare mycotic infection in elderly patients.
- Diagnosis is problematic due to a low frequency.
- Comma and corkscrew hairs are considered a specific marker for this disease.





