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It was a pleasure seeing you today. I hope that I was able to answer all of your questions. My goal is to partner with you to help you meet your healthcare needs. If you would like to schedule another appointment with me, please **call 763-421-7300.** Have a great day!

Text

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Allison Willkom, DPM

Athlete's Foot

Athlete's foot is a skin infection caused by fungus. A fungal infection may occur on any part of the body; on the foot, it is called athlete’s foot, or tinea pedis. Fungus commonly attacks the feet because it thrives in a dark, moist and warm environment, such as a shoe.

Fungal infections are more common in warm weather when feet tend to sweat more.  Fungus thrives in damp areas, such as swimming pools, showers and locker rooms.  Athletes often have sweaty feet and use the facilities where fungus is commonly found, thus the term "athlete's foot."

Symptoms

The signs of athlete’s foot, singly or combined, are dry, itching, scaling, inflammation, and blisters. Blisters can often lead to cracking in the skin, which may enable a secondary bacterial infection to begin. Cracking in the skin can also expose small raw areas of tissue, which may cause pain and swelling. Itching and burning may increase as the infection spreads.

Athlete’s foot may spread to the soles of the feet and to the toenails. It can be spread to other parts of the body as well, notably the groin and underarms, by those who scratch the infection and then touch themselves elsewhere. The organisms causing athlete’s foot may persist for long periods of time. Consequently, the infection may be spread by contaminated bed sheets or clothing to other parts of the body.

Prevention

It is not easy to prevent athlete’s foot because it usually is contracted in dressing rooms, showers, and swimming pool locker rooms where bare feet come into contact with fungus. However, you can do much to prevent infection by practicing good foot hygiene. Daily washing of the feet with soap and water; drying carefully, especially between the toes; and changing shoes and socks regularly to decrease moisture, help prevent the fungus from infecting the feet. Also helpful is daily use of a quality foot powder.

Tips

* Avoid walking barefoot; use shower shoes.
* Reduce perspiration by using talcum powder
* Wear light and airy socks
* Wear socks that keep your feet dry, and change them frequently if you perspire heavily

Treatment

In mild cases of the infection, it is important to keep the feet dry by dusting foot powder in shoes and socks. The feet should be bathed frequently and all areas around the toes dried thoroughly.

**About 90% of patients with tinea pedis can be treated with topical antifungals only. A good general rule is 1 gram of cream per foot per application of topical anti-fungal therapy. Duration, however, may vary, ranging from 1 week for interdigital tinea pedis to >2 months for chronic plantar tinea pedis. Research has shown the most effective topical agent to be TERBINAFINE**, but other topical agents such as Ciclopirox Olamine, Butenafine, and Tolnaftate are also effective in curing athlete’s foot (as long as patient is being prescribed sufficient quantities). Patients with hyperkeratotic tinea pedis can benefit from combining antifungal treatment with medications like **urea** to increase the penetration of the antifungal preparation.

Systemic therapy is indicated in the treatment of chronic tinea pedis, when repeated attempts to clear an infection with topicals has failed. Your doctor will recommend the appropriate oral therapy for you.

Lastly, If the infection is caused by bacteria, a broad spectrum antibiotic may also be prescribed by your podiatrist.

<https://www.foothealthfacts.org/conditions/athlete-s-foot>

<https://www.podiatrytoday.com/treatment-principles-tinea-pedis>