



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

TINEA INCOGNITO MANUUM- A CASE REPORT

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Background: Tinea incognito is a skin fungal infection with masked clinical appearance caused by topical corticosteroid therapy. The inflammatory reaction is reduced as well as the late immune response whose suppression allows spreading of the fungal infection and development of the secondary bacterial infection.

Observation: A female patient, 64 years old, a housewife. The patient was examined for lesions on the skin of hands and forearm developed a few weeks before. A two-week therapy with topical corticosteroid (fluocinolone acetonide and mometasone) was in progress. Besides the fact that her hands were often humid during housework, she had an everyday contact with a cat. The patient presented erythematous oval and sickled plaques in coin size covered with brown crusts, papules, single follicular pustules and discreet desquamation on the dorsal side of hands, accompanied by burning sensation.

Having cancelled topical corticosteroid therapy, the exacerbation occurred with intensified subjective complaints. Basic hematology and biochemical analyses were within the reference range. The microbiological examination of pustules revealed positive culture for *Staphylococcus aureus* sensitive to cephalexin, chloramphenicol, gentamicin. Mycology analyses presented positive results as well as the identification of *Microsporum canis* in the dermatophytes culture medium. A therapy conducted included cephalexin capsules in dose of 500mg 2x2 during seven days, terbinafine tablets in dose of 250mg daily during one month as well as baths in a mild solution of potassium permanganate, chloramphenicol unguentum twice a day during ten days with obligatory use of protective gloves. A veterinary examination of the cat was suggested.

Key message: After a month skin lesions were in regression.

