

Tinea pedis

What is tinea pedis?

Tinea pedis, also called *athlete's foot*, is a fungus infection of the skin of the feet. The fungus, called *tinea*, grows in the skin between and under the toes, especially the outer two little toes. Sometimes it spreads to the soles of the feet. It may also grow on the toenails, which become thickened and whitish-yellow. The same type of fungus may infect the skin of the groin, especially the scrotum in men. This condition is called 'jock itch'.



The area most commonly affected

What are the symptoms?

The most common symptoms are itchiness and foot odour. The skin becomes red, flaky and itchy. Sweat and water make the top layer of skin white and soggy.

How common is it?

Tinea pedis is very common, but many people do not find it troublesome enough to visit their doctor. Men are affected more than women.

Is it serious?

Tinea pedis is a harmless condition.

What is the treatment?

Self-help

- Keep your feet as clean and dry as possible.
- Carefully dry your feet after bathing and showering.
- It is good to dry your feet with a hairdryer.
- After drying your feet, use an antifungal powder, especially between the toes.
- Remove flaky skin from beneath the toes each day with dry tissue paper or gauze.
- Wear light socks made of natural absorbent fibres, such as cotton and wool, to allow better circulation of air and to reduce sweating. Avoid synthetic socks.
- Change your shoes and socks daily.
- If possible, wear open sandals or shoes with porous soles and uppers.
- Go barefoot whenever possible.
- Use thongs in public showers such as at swimming pools.



Wear well-ventilated sandals or open shoes to keep the feet dry

Medication

The old-fashioned remedies such as tea tree oil (*melaleuca alternifolia*), Castellani's paint, Whitfield's ointment and tolnaftate are still useful for mild cases, but the best treatment is one of the new antifungal creams or solutions such as clotrimazole, miconazole or terbinafine. These should be gently applied after drying, 2 or 3 times a day as directed for 2 to 3 weeks.

If the condition is severe and stubborn, your doctor may prescribe a course of tablets.