

Athlete's foot is also known as tinea pedis and commonly affects the interdigital space between the toes. This skin infection can possibly spread further to the skin of the plantar surface of the foot or the dorsum and between the other toes.

Fungal spores live and grow in warm, damp areas. They can be spread from sharing towels or from wet floors in showers and swimming pools. It is best to start treatment as soon as symptoms present as it can become harder to treat.

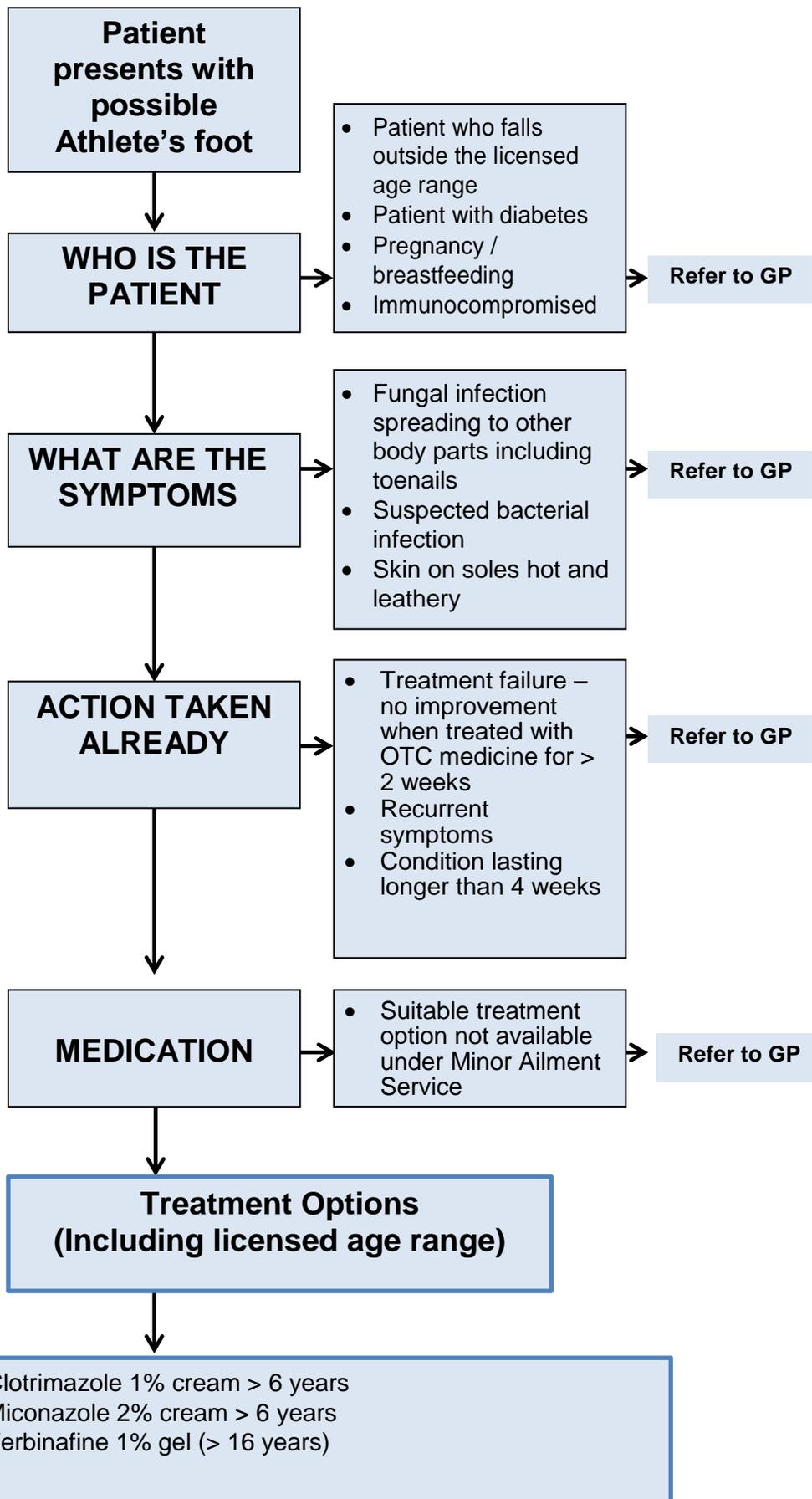
Symptoms:

Sometimes patients are asymptomatic and they may be unaware that they are spreading the infection.

Symptoms include

- Sore and itchy feet especially between the toes however the soles can also be affected.
- Stinging or burning sensation between the toes
- Thickened skin on the feet
- Peeling or cracked skin
- Reddened patches of skin with white and wet-looking surfaces
- Blistering skin

Advice on Self-Care (page 2)



Advice for Self-Care / Non Pharmaceutical Treatment	Treatment Options Formulary Items		
	Drug	Dose and Duration	Advice
<p>Advise the person to modify their footwear and ensure good foot hygiene. They should:</p> <ul style="list-style-type: none"> ○ Wear footwear that keeps the feet cool and dry. ○ Wear cotton socks. ○ Change to a different pair of shoes every 2–3 days. ○ After washing, dry the feet thoroughly, especially between the toes. <p>To reduce the risk of transmission, advise the person:</p> <ul style="list-style-type: none"> ○ To avoid scratching affected skin, as this may spread the infection to other sites. ○ To avoid going barefoot in public places (they should wear protective footwear, such as flip-flops, in communal changing areas). ○ Not to share towels and to wash them frequently. <p>It is not necessary to keep children away from school. However, to ensure that the infection is not transmitted to others, advise parents or carers to carefully follow the recommendations on hygiene and treatment.</p>	Clotrimazole 1% cream	Clotrimazole should be applied to the affected area 2–3 times a day and continued for at least 4 weeks. A strip of cream about half a centimetre long is enough to treat an area about the size of the hand	<p>Make sure the area is dry before applying treatment. Rub cream or gel into the skin thoroughly so the skin does not feel moist. Apply directly to the rash and the surrounding 4-6cm of normal healthy skin. Always wash hands before and after applying treatment. Although the rash may disappear quickly, this does not mean that the infection is cleared. Medication is usually required for 1-2 weeks after symptoms have gone to ensure the infection is successfully treated.</p>
Miconazole 2% cream	Miconazole should be applied to the affected area twice a day and continued for 10 days after all skin lesions have disappeared		
Terbinafine 1% gel (for adults only)	Terbinafine should be applied thinly to the affected area once or twice a day for 7 days		

References: Clinical Knowledge Summaries: Fungal Skin Infection <https://cks.nice.org.uk/fungal-skin-infection-foot#>

See individual product SPC for further information/advice

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