

RINGWORM

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RINGWORM (DERMATOPHYTOSIS)

DESCRIPTION

Ringworm is not caused by worms in or on the skin. The true ringworm infection is caused by a fungus which lives in the outermost layers of the external skin (called the epidermis). Ringworm fungi rarely, if ever, infect any internal part of the body.

The true ringworm infection first appears on the skin as a red, scaly patch. There may be one or more of these patches present. The infection can also involve the skin appendages as well, such as the hair and nails. Over time the skin patches will begin to get larger when no treatment is given. The border of the patch will extend and the center will clear, thus a ring shaped lesion is produced. It is most often the cause of “athletes foot” or “jock itch”; however, ringworm of the foot appears as a scaling or crackling of the skin, especially between the toes.

DIAGNOSIS

The active area of the patch (where fungi can be found) is the border of the lesion. One can identify that fungi are present approximately sixty percent of the time by taking scrapings of the scales at the lesion border and examining them under a microscope. A more accurate method of identification is that of laboratory culture.

MODE OF TRANSMISSION

Direct skin-to-skin or indirect contact, especially from the back of theater seats, contaminated floors, shower stalls, toilet articles such as combs and hair brushes, or clothing and hats contaminated with hair from infected persons or animals, more often cats than dogs. Young children who are infected should minimize close contact with other children until effectively treated. When multiple cases occur, seek advise from your local health department.

INCUBATION PERIOD

10 – 14 days.

TREATMENT

Griseofulvin (Grispeg) by mouth for at least 4 weeks is treatment of choice for many. Topical (ointments) anti-fungal medications may be used concurrently. System (by mouth) antibacterial agents are useful if ringworm lesions become secondarily infected by bacteria.

PROGNOSIS

Ringworm infections are usually an annoyance skin disease. They rarely cause any serious complications. However, if a person has persistent ringworm infection unresponsive to good treatment regimens, then an evaluation of that person’s general health is in order. Occasionally a persistent ringworm infection of the skin may be indication of other body diseases or dysfunction.