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Tinea cruris and Tinea genitalis: Clinical manifestations and diagnostic challenges**Kalsi Avneet Singh, Thakur Rameshwari and Kushwaha Pragya**
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The dermatophytes are the causative agent of dermatophytoses. Recently, extensive skin lesions without central clearance and atypical clinical manifestations of dermatophytoses have been seen and reported from different regions of India. Three species of dermatophytes implicated are: *Trichophyton*, *Microsporum* and *Epidermophyton*. The dermatophyte fungi comprise about 30 species of keratinophilic moulds causing infections of skin, which can manifest in different anatomical regions of the body and have been named accordingly. Thus, tinea capitis affects the scalp, tinea unguium- the nails, tinea cruris- the groin, tinea genitalis- the genitalia. Tinea cruris and Tinea genitalis are the focus of this review. Although dermatophytoses does not cause mortality, it does cause morbidity and poses a major health problem.

Patients and Methods: A study was conducted from January 2016 to August 2016 at Muzaffarnagar Medical College, Muzaffarnagar, Uttar Pradesh, India. A total of 260 patients were enrolled into study and who were not receiving any anti-fungal treatment. When there was involvement of penis and scrotum in males and labia majora and mons pubis in females, the clinical diagnosis of tinea genitalis was made and confirmed by mycology laboratory after preparing Potassium hydroxide (KOH) mount and fungal culture. In the present report, we reviewed a total of 260 cases of Tinea cruris and Tinea genitalis. A total of 128 tinea cruris in males, 72 in females and 40 tinea genitalis with tinea cruris in males and 20 in females were observed. Until now, *Trichophyton rubrum* has been the most frequently isolated species, followed by *Trichophyton interdigitale* (former Tinea mentagrophyte), *Epidermophyton floccosum* and *Trichophyton verrucosum*.

Conclusion: All cases of Tinea cruris, even tinea corporis should be examined for tinea genitalis. The condition is more common than what we have been imagining. Hot and humid climate of the country and promiscuous society are the common contributing factors

Biography

Kalsi Avneet Singh is an eminent Physician who obtained his MBBS degree from Chaudhary Charan Singh University, Meerut, a premier university in India. He obtained his Diploma in Dermatology (Alternative Medicines) degree and Bachelors of Alternative System of Medicines degree from Indian Board of Alternative Medicines. He is an active participant in various CMEs both at National as well as International level. He has been the co-author of manuscript titled *Clinical manifestations of Tinea faciei and Tinea genitalis and their diagnostic challenges*, which has been submitted for publication in *Indian Journal of Dermatology, Venereology, and Leprology*, India. He has been awarded with the prestigious Health Excellence Award by Indian Board of Alternative Medicines, Kolkata, India.

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