### **CONFERENCE SCOR** Joint Conference

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## PSORIASIS, PSORIATIC ARTHRITIS & SKIN INFECTIONS

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#### Fighting tinea pedis in northern Eurasia

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**Statement of the Problem:** The dissolution of unified healthcare in countries of former USSR together with the spread of tinea pedis hampers gathering accurate statistical data, since it was common to report all tinea infections to a centralized system. Low admission rates and common self-treatment further obstructs monitoring for prevalence of tinea pedis.

Methodology & Theoretical Orientation: We have analyzed the data of major tinea pedis and onychomycosis screening projects involving Russia and CIS countries. In Achilles study (1997-2001), the share of tinea pedis and onychomycosis among diagnoses made in Russian dermatology offices was almost the same as in other European countries: 21-22%. Later, the average prevalence of tinea pedis and/or onychomycosis in 63.9 per 1000 of adult population of Moscow and Moscow region was evaluated by 11-years long total screening of large (over 30 thousand) cohorts in a major healthcare system. The data from our Hotline project (2001-2002) indicate that manifest tinea pedis is diagnosed in 78.1% Russian onychomycosis cases, with 55.1% of 'moccasin' type and 17.2 of interdigital type. In 2012-2015, for tinea pedis and/or onychomycosis, we had observed prevalence between 47.2 and 62.6 per 1000 adult population. Admissions to dermatology office today are seldom caused by tinea pedis per se, but frequently by real or wrongly suspected onychomycosis, although our analysis of our www.gribok.ru online questionnaire (over 49 thousand respondents, age median 35 years) shows that only 12% of patients with onychomycosis self-report their 'skin foot problem'.

**Conclusion & Significance:** The prevalence of tinea pedis in largest cities of northern Eurasia grows slowly. Excessive media advertising for over-the-counter antifungals in 2013-2015 made the public generally aware of the existence and contractibility of 'nail fungus'. Our next goal is better patient education programs and fostering 'responsible' self-administered antifungal treatment.

#### **Biography**

He is a National Opinion Leader with more than 20 textbooks and monographs published. His major research topic is superficial mycoses. He is the Inventor of SCIO (scoring clinical index for onychomycosis, 1999, used in 9 international clinical trials to date) developer of the first successful direct PCR probes for dermatophyte infections of skin and nails (2004). For the last 17 years, he serves as Secretary General to All-Russian National Academy of Mycology, representing the Russian mycological community in international scientific bodies. He is devoted to his alma mater, Moscow Sechenov University; he continues his career as Ordinary Professor at the department of Clinical Immunology and Allergology.

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