

Infection Caused by Athlete's Foot: Its Types and Complications

Faramarz Bozorgomid*

Department of Infectious Diseases, University of Tabriz, Bahman Boulevard, Iran

DESCRIPTION

Athlete's foot (tinea pedis) is a fungus-caused skin disease of the feet. Itching, scaling, cracking, and redness are common signs and symptoms. The skin may blister in rare circumstances. The fungus that causes athlete's foot can infect any area of the foot, although it most commonly grows between the toes.

Types of infection

Toe web infection: The most frequent type of athlete's foot infection is a toe web infection. It usually affects the skin between fourth (ring) and fifth (big toe) toes (pinkie toe). Skin may change colour, crack, peel, or flake.

Moccasin-type infection: This infection affects the bottoms, heels, and borders of the feet. For a few days, the feet may be sore. The skin on the bottoms of the feet thickens and cracks as a result of this. The toenails may become infected in rare situations.

Vesicular-type infection: A vesicular-type infection usually affects the bottoms of the feet, but it can affect them anywhere. Bumps or fluid-filled blisters characterise a vesicular infection (vesicles).

Ulcerative infection: This is the most uncommon kind of athlete's foot. Between the toes, open sores (ulcers) are common. The bottoms of the feet may also develop open sores.

Complications

The skin may crack as the condition advances, resulting in

bacterial skin infection and lymphatic vessel irritation. If left to grow for too long, athlete's foot fungus can migrate to the toenails, eating on the keratin in them, causing onychomycosis. Because athlete's foot might itch, it can activate the scratch reflex, allowing the infected area to be scratched before the host realises it. Scratching can cause more harm to the skin and make the condition worse by allowing the fungus to grow and thrive more easily. The itching caused by athlete's foot can be so intense that it causes hosts to scratch so hard that they develop excoriations (open wounds) that are vulnerable to bacterial infection. Scratching will likely remove scabs, halting the healing process. Scratching diseased places can spread the fungus to the fingers and under the nails. It can infect the fingers and fingernails if not wiped away quickly enough, developing in the skin and the nails (not just underneath). It can be spread wherever the individual touches after scratching, including other parts of the body and the environment. Scratching also causes contaminated skin scales to slough off into the surroundings, potentially spreading the infection further. When the athlete's foot fungus or contaminated skin particles spread to one's surroundings (such as to clothes, shoes, bathroom, etc.). Another difficulty is the ease with which the fungus spreads to other parts of the body (on one's fingers). After the fungus has migrated to other parts of the body, it can easily return to the feet once they have been treated. Some people may develop an allergic reaction to the fungus known as an autoeczematous response, which causes blisters or vesicles to emerge on the hands, chest, and arms. The autoeczematous reaction usually goes away when the underlying infection has been treated.

Correspondence to: Faramarz Bozorgomid, Department of Infectious Diseases, University of Tabriz, Bahman Boulevard, Iran, E-mail: boro34marz@mid.ir

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