

# Tinea Versicolor

**Tinea (or pityriasis) versicolor** is a common fungal skin infection that could cause areas of a person's skin to turn a variety of colors.

**Malassezia yeasts** are the type of fungi that cause tinea versicolor, and they normally live on the skin. Sebaceous glands release a fatty, oily substance called sebum through hair follicles in skin that provides nutrients necessary for the yeasts to survive. Living in hot and humid climates, sweating excessively, or a weakened immune system allows the fungus to flourish, causing tinea versicolor. Tinea versicolor is most commonly seen in adolescents and young adults and it can affect some families more than others, but it is not contagious.

## Symptoms

Tinea versicolor can cause the skin to appear lighter, darker, or redder than the surrounding unaffected skin, and it commonly affects the chest or back because these areas have the greatest number of sebaceous glands. Tinea versicolor may also involve the upper arms, neck, and face. Lighter patches of tinea versicolor are often noticed during the summer months, when the affected areas fail to tan compared with nearby unaffected tanned skin. **Scales**, or flakes of the outer layer of skin, are often seen as well. Tinea versicolor usually causes no symptoms, but itching occurs in some patients.

## Diagnosis

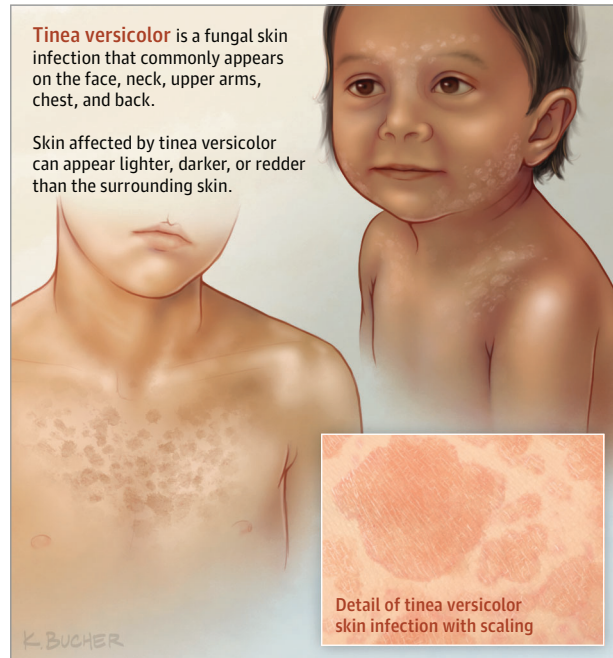
A doctor may scrape a small portion of skin from an affected area for examination with a microscope, where the round and long, narrow forms of the fungi may resemble spaghetti and meatballs, confirming the diagnosis. Alternatively, the doctor may scrape or stretch the affected area to see if it causes more scale to appear. This is called the **evoked scale sign** and it, along with the skin examination under the microscope, can help distinguish tinea versicolor from similar-appearing conditions. The doctor may be able to make the diagnosis by skin examination alone.

## Treatment

Selenium sulfide shampoo is an effective treatment for tinea versicolor. It causes the outermost portion of the skin to shed and thus removes the fungus that is causing the disease. Patients are advised to shampoo the affected areas for 10 minutes daily before rinsing and to repeat this process daily for 1 week. Topical ketoconazole and zinc pyrithione are other common treatment options. However, if the infection is widespread or resistant to treatment, oral fluconazole or oral itraconazole can be used. After successful treatment, it can take

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Skin affected by tinea versicolor can appear lighter, darker, or redder than the surrounding skin.



months for the body to restore natural color to the affected areas, and this lengthy pigment change may lead a patient to think the treatment failed. However, persistence of scale and the "spaghetti and meatball" microscope finding indicate the infection is still active and requires further treatment. Tinea versicolor may relapse, often during summer months, and resumption of previously effective therapy is usually successful. For patients with frequent recurrences, monthly oral or topical medications may prevent future episodes.

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