A number of medical conditions can affect the feet, either the structure or the skin of the feet. This article gives a brief overview of two common skin conditions that affect the feet – athlete's foot and ingrown toenails.

Athlete’s foot

Tinea pedis (athlete’s foot) is a contagious fungal infection that affects the skin of the feet. Unlike the name implies, this condition is not limited to those with an athletic disposition. Patients with athlete’s foot often complain of itchy, flaky skin between the toes, which becomes white and peels off. Athlete’s foot occurs as a result of sweating of the feet, which causes an accumulation of moisture in these areas that encourages the growth of fungi. In severe cases, there may be painful cracking of the skin, increasing the risk of a bacterial infection. These extreme cases may occur in older people who have poor blood flow to the feet.

Many over-the-counter (OTC) preparations are available for the treatment of athlete’s foot, including creams, powders, solutions, sprays and paints. Topical allylamines (e.g. terbinafine), azoles (e.g. clotrimazole, miconazole, ketoconazole and bifonazole), undecenoic acid and tolnaftate have been found to be effective.

The recommended product should be regularly applied to clean, dry feet and continued to be used for up to two weeks after the symptoms have stopped to ensure the fungus is eradicated.

Practical points

Footwear

Avoid wearing tight-fitting shoes or shoes made from synthetic material as this makes it impossible for moisture to evaporate. Choose to wear cotton socks over nylon socks to allow for evaporation of moisture.

Foot hygiene

Ensure feet are carefully and thoroughly dried after washing, especially between the toes, before applying topical antifungals.

Reduce the spread of athlete’s foot

The infection may spread from person to person in communal showers and bathrooms or in other moist areas where infected people walk barefoot. Use of some sort of footwear, such as rubber sandals, can reduce this risk.

Prevention of reinfection

Care should be taken to ensure that shoes and socks are kept free of fungus. Socks should be changed and washed regularly. Shoes can be dusted with a fungicidal powder to eradicate the fungus.

Although athlete’s foot can be managed at home, it is important to identify cases that require referral to the doctor. These include:

• Severe infection, affecting other parts of the foot
• Signs of bacterial infection
• Infection that does not respond to appropriate treatment
• Diabetic patients
• Involvement of toenails

Ingrown toenails

An ingrown toenail is a painful condition in which the edges of the nail grow into the surrounding skin. This occurs when a toenail that is distorted in shape grows improperly into the
skin around the nail. However, it can also happen when the skin around the nail grows unusually fast and engulfs part of the nail. Ingrown toenails may be caused by wearing narrow, tight shoes or incorrectly cutting the nail into a curve, rather than straight across.

Although, there may be no symptoms at first, an ingrown toenail can be very painful, especially if pressure is applied to that area, which may also appear red. Left untreated, the area may be prone to infection, and in such cases, the pain becomes worse with the area becoming swollen. The area can also exude pus, which accumulates under the skin.

Treatment of ingrown toenails should be initiated as soon as it is recognised. In the absence of infection, various home remedies can be of help, such as:

- Soaking the affected foot in warm water up to four times a day and ensuring the foot is kept dry during the rest of the day.
- Wearing comfortable shoes that do not apply pressure to the affected area.
- Consulting with the doctor if there is no improvement or if it worsens.

For mildly ingrown toenails, the doctor or podiatrist can gently lift the edge of the nail out from under the surrounding skin and place sterile cotton under the nail until the swelling goes away. If an ingrown nail requires further attention, the doctor or podiatrist usually numbs the area with a local anaesthetic, then cuts away and removes the ingrown section of nail. The inflammation can then subside, and the ingrown nail usually does not recur.

**Summary**

- Most common foot problems can be easily avoided and treated.
- Patients should ensure that shoes fit properly and practise thorough foot hygiene, including correct cutting of toenails.
- Diabetic patients should be encouraged to check their feet daily and seek medical attention when necessary.

**Bibliography**