

## **WELLNESS UPDATE 2006, #4**

### **ATHLETE'S FOOT**

The medical name for athlete's foot is "tinea pedis" which means "fungus of the foot." Tinea is a fungus that can grow anywhere on the body. It is the same fungus that causes ringworm. The feet are especially vulnerable to developing a fungus because of the warm, dark, moist environment found inside the shoes. Athlete's foot usually occurs between the toes, but if athlete's foot is left untreated it can spread to the soles of the feet and toenails.

### **SUSCEPTIBILITY TO ATHLETE'S FOOT**

The fungus causing athlete's foot thrives in a damp, dark, moist environment. Public swimming pools, showers and locker rooms are prime breeding grounds for this fungus.

### **PREVENTING ATHLETE'S FOOT**

- Avoid walking barefoot in public areas, especially swimming pools, showers and locker rooms. Wear flip-flops, sandals or water shoes to avoid contact between bare feet and the floor.
- When at home, take off shoes and socks so the feet are exposed to the light and air.
- Change socks at least daily. Do not put socks worn for practice or competition back on until they have been laundered.
- If possible, remove shoe insoles and allow them to dry each night.
- **NEVER** borrow other people's socks or shoes!
- Wear cotton socks that help keep the feet dry.
- Use a talcum, or antifungal, foot powder helps keep feet dry. **AVOID** the use of common foot powder boxes as they can spread diseases.
- Wash the feet with soap and water at least once a day, and always after practice or competition. Dry feet completely after washing, especially between the toes.

## **SIGNS & SYMPTOMS OF ATHLETE'S FOOT**

- Cracked, dry, flaking, itching, white, patches of skin, usually between the toes.
- Blisters can occur that can break open causing fluid to ooze out and exposing small, raw areas of tissue. These areas often burn and become painful and swollen.

## **TREATMENT OF ATHLETE'S FOOT**

Athlete's foot usually responds well to self-care. All of the precautions used to prevent athlete's foot should also be used when treating it. Self-care includes over-the-counter antifungal powders and ointments to control the infection. Common name brand powders are Desenex, Gold Bond, Lamisil, and Tinactin. Common brand name ointments are Lamisil, Lotrimin and Tinactin. Most cases of athlete's foot go away within 2-4 weeks with over-the-counter treatment. Prescription treatments, topical and oral, may be needed for more persistent cases. If athlete's foot is not cured in 2-4 weeks with self-care, a physician should be consulted.

In rare cases, a simple fungal infection such as athlete's foot can become "super-infected" with bacteria. If this should happen, the rash will become increasingly painful and red. The foot may become swollen and develop blisters and even open sores in the infected area. These are indications that prescription oral antibiotics are needed.

Sources: "Athlete's Foot," [EmedicineHealth.com](http://EmedicineHealth.com)., 8/10/2005; "Athlete's Foot." [MayoClinic.com](http://MayoClinic.com), 11/30/04; "Athlete's Foot," [Medline Plus](http://Medline Plus), 4/30/05; "Athlete's Foot," [Orthopedics.about.com](http://Orthopedics.about.com), May 29, 2006; "Athlete's Foot: Prevention is the key." [The First Aider](http://The First Aider), date unknown; "Fungal Infections and Parasitic Infestations in Sport," Winokur, Rebecca, MD and Dexter, William, MD, [The Physician and Sports Medicine](http://The Physician and Sports Medicine), Volume 32, Number 10, October 2004; "Tinea Infections: Athlete's Foot, Jock Itch and Ringworm," [Familydoctor.org](http://Familydoctor.org), 11/05.

**Questions and/or comments about areas dealing with student-athlete's wellness are welcome and encouraged. They should be directed to Alan Beste, ATC, LAT, Assistant Executive Director, Iowa High School Athletic Association, PO Box 10, Boone, IA 50036. (515) 432-2011. <abeste@iahsaa.org>**