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## Resistant fungal infection in Indian subcontinent

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Fungi are ubiquitous heterotrophs and exist as saprophytes or parasites. Because of the increase in worldwide travel mycoses has crossed all geographical borders. Dermatomycosis is nowadays becoming recalcitrant and recurrent especially in the tropical climates of India. Dermatophytes which infect skin, hair and nails are limited to dead keratinous tissue but the immune response occurs in dermis. Antifungal drug resistance is increasing at an alarming rate and patients are doing the rounds of OPDS under distress. Dermatophytosis caused by *Epidermophyton, Trichophyton* and *Microsporum* species is flourishing due to decreasing effect of drugs like terbinafine and griseofulvin and itraconazole which are the preferred drugs. 20% to 30% of daily OPD turns out to be patients of fungal infection not responding to treatment appropriately. Most commonly patients come with self-treatment with topical steroid ointments due to its OTC availability. There is also rampant use of systemic steroids which flairs the infection. There is large volume of cases of tinea cruris especially in adult males due to usage of tight fitting undergarments and denims which adds to moist condition in already hot and humid weather. Diabetic, atopic and immune-compromised patients are most difficult to treat. It is need of the hour to curtail this growing fungal resistance in collaboration with microbiologists and conducting studies for other causative factors and further lay down guidelines for management of such patients so that it does not become a global problem.

**Biography:**

Jaskanwal Kaur has served as a Physician for almost 20 years. She is in the field of dermatology for the last 8 years and has presented papers at the national and international level and obtained scholarship at Vancouver by International League of Dermatological Society for research work in alopecia areata.

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