

BRIEF COMMUNICATION

DERMATOMYCOSIS OF THE TOE WEB CAUSED BY *Curvularia lunata*

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KEYWORDS: Dermatomycosis; Toe web; *Curvularia lunata*.

Fungal infections of the feet are primarily caused by dermatophytes, but some nondermatophyte fungi have been implicated in several patients, particularly for toe nail infections. These infections clinically mimic dermatophytosis, and when examined microscopically with potassium hydroxide, the agents resemble the dermatophytes. However, correct identification is very important since some nondermatophyte fungi are refractory to conventional therapy.

We communicate a case of dermatomycosis of the toe web caused by *Curvularia lunata*, mimicking intertriginous *tinea pedis*.

The patient was a 50-year-old married white woman, commercial employee, with a scaling lesion in the web between the fourth and fifth toes of the right foot of six month duration. Skin scrapings examined in 10% potassium hydroxide solution revealed hyaline branched septate hyphae, and irregular round cells, without arthroconidia (Fig. 1). Cultures on cycloheximide free Sabouraud's medium incubated at 25° C revealed the growth of effuse, dark-gray colonies. Microscopically branched septate, hyaline to brown hyphae, and curved or nearly straight conidia with three septa, the subterminal cell curved, swollen and distinctly larger than the remaining, characteristic of *C. lunata* were seen (Fig. 2). Direct examination were positive in more five samples collected during a 45 days period, and *C. lunata* grew in all occasions. The patient was treated with a cream containing isoconazole nitrate during three months, with healing of the lesion.

Fungi of the *Curvularia* genus are ubiquitous organisms, occurring more frequently in soil and decaying plants. Although rarely pathogenic, *Curvularia* species have been implicated in cases of visceral infections, such as endocarditis⁸, peritonitis¹¹, hepatosplenic abscess¹⁴, urinary¹³, pulmonary¹⁰, cerebral⁴, and disseminated infections³. Keratitis¹⁵, allergic or invasive sinusitis²,

and allergic bronchoalveolar disease⁷ have also been reported. Rarely subcutaneous infections are noted, such as phaeohyphomycosis⁶, leg ulcer⁵, and mycetoma¹². Superficial infections are extremely rare, and only a case of onychomycosis was reported¹.

Dermatomycosis is a term used to encompass several clinically distinctive infections of the skin caused by nondermatophyte fungi, including dematiaceous and hyaline hyphomycetes. It is important to emphasize that *Curvularia* species produce dark colonies on the agar media, but in tissues the fungal elements are hyaline to brown, with varying morphologic features⁹. Hence, only a correct diagnosis by means of microscopic examination and cultures on media that do not contain cycloheximide, will allow proper identification of the causative agent.

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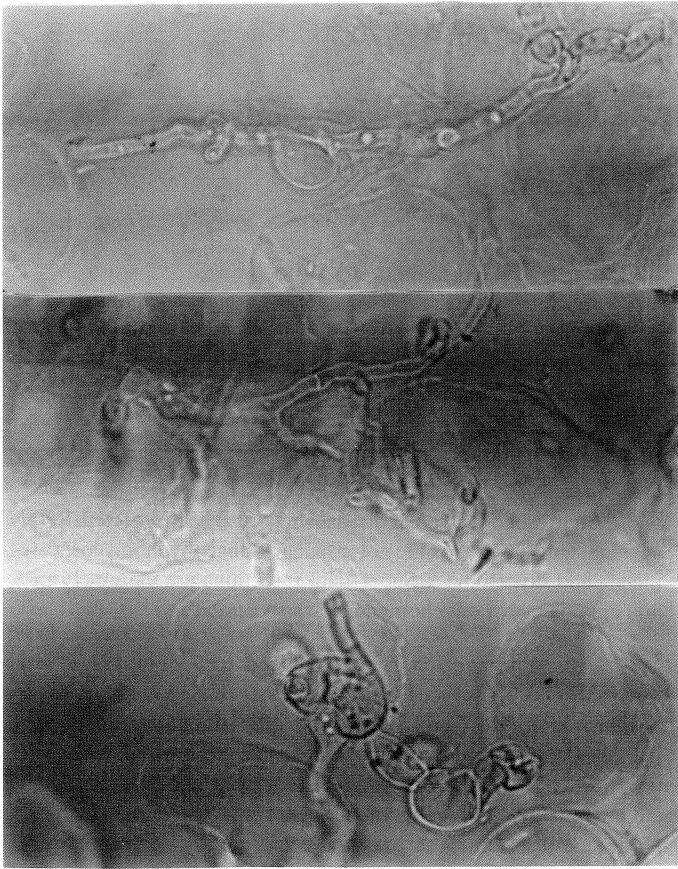


Fig. 1 - Skin scrapings: hyaline branched septate hyphae, and irregular round cells (10% potassium hydroxide), x250.

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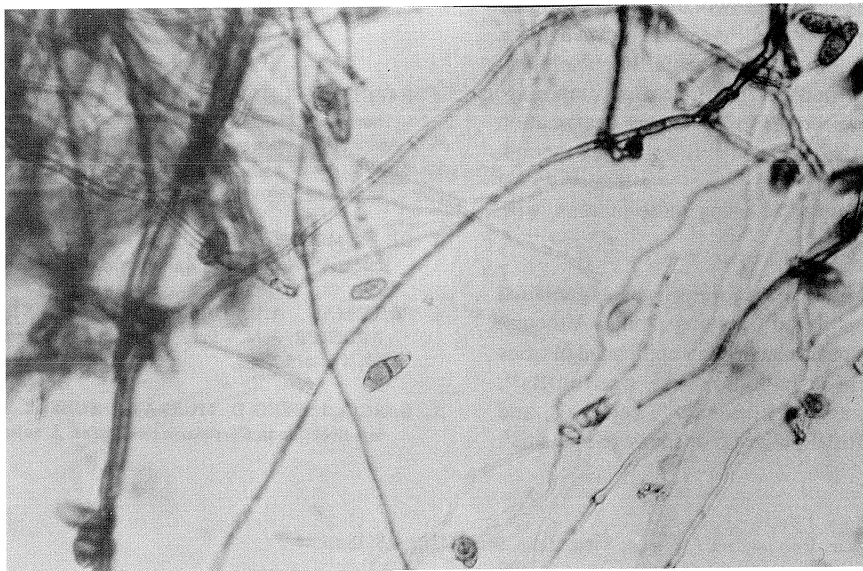


Fig. 2 - *C. lunata*: hyaline to brown hyphae and conidia (Lactophenol), x250.