Tinea Capitis With Kerions

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By Joe Monroe, PA-C [1]

A 6-year-old African American boy is referred for evaluation of “cellulitis,” which had persisted for several weeks. The condition had failed to respond to oral antibiotics prescribed by another practitioner.

Joe Monroe, PA-C, of Tulsa, Okla, noted multiple painful, boggy nodules and plaques—or kerions—on the scalp, including one that was 4 cm in diameter, as well as significant hair loss. The suboccipital and posterior cervical nodes were markedly enlarged; this finding suggests active infection. Cultures of scalp specimens were positive for dermatophytes. The patient was treated with a 2-week tapering course of prednisolone to decrease the inflammation in the kerions; oral griseofulvin for 6 weeks was also prescribed. The parents were advised to wash the child’s hair daily with ketoconazole shampoo to reduce the risk of transmission of the dermatophyte.

Much more common in African American children than in white youngsters, tinea capitis is often mistaken for dandruff; the kerion type of tinea capitis can be confused with a bacterial infection.1 Left undiagnosed and untreated, the condition can cause permanent hair loss.

REFERENCE:

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