

TRICHOMYCOSIS PUBIS- A COMMON DISORDER AT UNCOMMON SITE

Jyoti Budhwar¹, Anzy Batra²

¹Assistant Professor, Department of Dermatology, Venereology and Leprosy, Sri Guru Ramdas Institute of Medical Sciences and Research, Vallah, Amritsar.

²Consultant Dermatologist, Khurana Skin and Laser Centre, Dabwali Road, Sirsa, Haryana.

Corresponding Author:

Jyoti Budhwar, MBBS, MD. Assistant Professor, Department of Dermatology
Venereology and Leprosy, Sri Guru Ramdas Institute of Medical Sciences and Research, Vallah, Amritsar. Email- drjyoti84@yahoo.in

Sir,

Trichomycosis is a bacterial infection of the hair shaft that commonly involves the axillary hair and, more uncommonly, the pubic hair. It is characterized by the presence of concretions along the hair shafts, clinically observed as yellow, and rarely as red or black nodules. These concretions derive from bacterial colonization along the hair shaft containing dried apocrine sweat with a cementing substance generated by the bacteria. The name is misnomer because trichomycosis is bacterial in origin rather than a fungal infection so should be called as “trichobacteriosis”.¹

Trichomycosis is caused by the overgrowth of *Corynebacterium* (*Corynebacterium tenuis*, *C propinquum*, *C flavescens*) and *Serratia marcescens*. The bacteria proliferate in moist areas of the body, thus mainly affect underarm hairs, and to a lesser extent, pubic hair. While as many as 33% of adults have colonization by these bacteria in the inguinal or axillary regions,

factors such as hyperhidrosis initiate more extensive growth and clinical manifestations. Hence, disturbances in apo-ecrine sweat production and bacterial proliferation are crucial for development.² The actual nidus may be through the modification of apocrine sweat by elaborated cement substance to create the insoluble material that holds bacteria to the hair shaft. The white or yellowish, and less commonly, red or black, material on the hair contains an extremely high number of bacteria.³

We report a case of 38 years old female with complaints of malodour from her groins and staining of undergarments from the last two months. Examination revealed waxy yellowish deposits adherent to several hair shafts in the pubic area. The patient was diagnosed as case of trichomycosis pubis and was advised to shave off pubic hair and was prescribed sodium fusidate 2% ointment twice daily.



Figure 1: showing yellowish concretions along pubic hair.



How to cite this article:

Budhwar J, Batra A. Trichomycosis pubis- A common disorder at uncommon site. JDA Indian Journal of Clinical Dermatology. 2019;2:86.

References

1. Blaise G, Nikkels AF, Hermanns-Lê T, Nikkels-Tassoudji N, Piérard GE. *Corynebacterium*-associated skin infections. *Int J Dermatol*. 2008;47:884–890.
2. McBride ME, Freeman RG, Knox JM. The bacteriology of trichomycosis axillaris. *Br J Dermatol*. 1968 Aug. 80(8):509-13.
3. Almazán-Fernández FM, Fernández-Crehuet Serrano P. Trichomycosis axillaris dermoscopy. *Dermatol Online J*. 2017 Jun 15.23(6).