



Prescription Pattern of Antifungal Agents in Patients with Superficial Dermatophytosis in a Tertiary Care Hospital: A Prospective Observational Study

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Abstract:

Superficial dermatophytosis cases have increased exponentially in the last few years in dermatology OPDs. While tinea may not be fatal in most cases, it causes morbidity and adversely impacts quality of life. The goal of the current study was to examine the prescription pattern at a tertiary care hospital's dermatology department. After obtaining approval from the Institutional Ethics Committee, a prospective observational study was conducted among 100 prescriptions of patients with superficial dermatophytosis. The prescribing patterns were evaluated using the WHO core prescribing indicators. The study included 100 patients, with a mean age of 37.96 ± 15.30 years; males constituted 56% of the study population. Tinea corporis with tinea cruris was the most common diagnosis, and pruritus was the predominant symptom. A total of 376 drugs were prescribed, averaging 3.76 drugs per prescription, with antifungals being the primary treatment and antihistamines commonly used for symptomatic relief. No injectable drugs or systemic antibiotics were prescribed. Itraconazole was the most commonly prescribed systemic antifungal. The absence of concomitant antibiotic therapy suggests that treatment was primarily directed toward fungal infection, without routine addition of antibiotics. The findings provide an overview of current antifungal prescribing practices and may help promote rational and evidence-based use of antifungal agents.

Keywords:

Superficial dermatophytosis, Antifungal agents, Prescription pattern, WHO prescribing indicators.