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A Retrospective cohort study of Tinea Pedis and Tinea unguium in Inpatients in a Psychiatric Hospital

(精神神経科病院入院患者を対象とした足白癬、爪白癬の後ろ向きコホート調査)

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Abstract

We conducted a retrospective cohort study on clinical and mycological features of tinea pedis and tinea unguium in psychiatric inpatients in Japan. Of the 317 inpatients (152 with schizophrenia and 165 with depression), 46.1 % had tinea pedis and 23.7% had tinea unguium. Of the patients with tinea pedis, 48.6% also had tinea unguium. The most common clinical type of tinea pedis was the combination of interdigital type and hyperkeratotic type. The mean clinical score of tinea pedis was 5.9, and the mean clinical score of tinea unguium based on the Scoring Clinical Index for Onychomycosis (SCIO) was 15.8. The main causative species of tinea pedis were *Trichophyton rubrum* (68.4%) and *T. mentagrophytes* (26.3%). No statistically significant differences were observed in incidence rates of tinea pedis or tinea unguium between men and women or between patients with schizophrenia and those with depression. As for incidence rates by age, patients with depression showed a single peak for tinea pedis and/or tinea unguium in their 50s, while patients with schizophrenia exhibited twin peaks for tinea pedis and/or tinea unguium in their 50s and 70s. Both tinea pedis and tinea unguium tended to become more severe in patients with chronic schizophrenia. Our study suggests that schizophrenia and depression, like diabetes mellitus and HIV infections, should be regarded as risk factors for tinea pedis and tinea unguium. To our knowledge, there are few studies internationally regarding clinical and mycological features of tinea pedis and tinea unguium in psychiatric patients This report is the first such study in Japan.