

## Oral treatments effective for tinea pedis

<b>Clinical question</b>	How effective are oral treatments for tinea pedis?
<b>Bottom line</b>	Terbinafine and itraconazole were more effective than no treatment, and terbinafine appeared to give a significantly better cure rate than griseofulvin. In addition, terbinafine may require a shorter treatment period (2 weeks), which is preferable for maximising patient compliance. No significant difference was detected between terbinafine and itraconazole, fluconazole and itraconazole, fluconazole and ketoconazole, or between griseofulvin and ketoconazole, although the trials were generally small. All drugs reported adverse effects, with gastrointestinal effects being most commonly reported.
<b>Caveat</b>	Of the included trials, only 5 were published in recent years, with the other 10 trials having been published pre-1996. The quality of reporting of the trials was variable, and, in general, the method of generating the randomisation sequence and concealing allocation was not clearly reported, with the result that the trials were at unclear risk of bias for these domains. A similar omission was the lack of blinding of outcome assessors, especially with respect to the assessment of clinical signs and symptoms, as this outcome is, by its nature, subjective. Only 3 trials assessed the condition beyond 3 months.
<b>Context</b>	About 15% of the world's population suffers from tinea pedis. Oral therapy is usually used for chronic conditions or when topical treatment has failed.
<b>Cochrane Systematic Review</b>	Bell-Syer SEM et al. Oral treatments for fungal infections of the skin of the foot. Cochrane Reviews, 2012, Issue 10. Article No. CD003584. DOI: 10.1002/14651858.CD003584.pub2. This review contains 15 studies involving 1438 participants.
Pearls No. 381, January 2013, written by Brian R McAvoy.	

### [References]

PEARLS are succinct summaries of Cochrane Systematic Reviews for primary care practitioners. They are funded by the New Zealand Guidelines Group.

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