Tinea Versicolor

- Tinea Versicolor (T.V.) is a common infection of the skin caused by a yeast called Malassezia furfur. It affects 2-8% of the U.S. population.

- The yeast (Malassezia furfur) that causes tinea versicolor can be found as normal flora on the skin of 90-100% of adults, thus it is not contagious.

- Although T.V. can temporarily discolor your skin, it is not a serious problem; it does not result in permanent skin problems or "internal" problems.

- Some people appear to be more susceptible to the effects of M. furfur and thus T.V. than others.

- The yeast that causes T.V. can either cause lightening (more common) or in some cases darkening of the skin. It is often more noticeable in the summer months due to sun exposure; affected skin does not tan normally.

- Hot, humid climates and sweating predispose to T.V.

- In the U.S., T.V. is most common in people 15-24 years old and affects all races and men and women equally.

- T.V. generally involves the chest, abdomen, back, shoulders and upper arms. It rarely affects the face or lower legs.

Treatment for T.V.

- Most treatment will resolve the M. furfur overgrowth rather quickly, but no matter what treatment is used it often takes months for the discoloration of the skin to resolve.

- People who are susceptible to T.V. often get it repeatedly, generally during the summer. Using a shampoo such as selenium sulfide (Selsun Blue) or Nizoral shampoo 1-2 times per week can reduce the overgrowth of M. furfur on the skin and prevent T.V.

Oral medication

- Fluconazole 300 mg once and repeat in 2 weeks, or ketoconazole 400 mg once and repeat in 1 week. Ketoconazole (not fluconazole) is best taken with something acidic (e.g. orange juice) to increase its absorption.

- Fluconazole and ketoconazole are secreted in sweat, so they work best if one exercises after taking them and then avoids showering for a few hours.

- Ketoconazole can very rarely cause liver toxicity, even with a single dose. This result is even more rare with fluconazole.
Topical medication

- Topical ketoconazole (Nizoral) is commonly used and is available as both a cream and a shampoo; a 1% shampoo is available OTC. Clotrimazole (OTC) also works; terbinafine does not work well.

- Topical treatment is generally used twice daily for 2-3 weeks, and once or twice weekly as a preventative measure.

- Selenium sulfide (Selson Blue) can also be used as treatment.

- All topical treatments (including shampoos) should be left on the skin for at least 10 minutes before washing off; overnight application is even better. The creams can be left on all day.