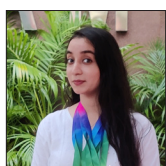


Images/Instrument in Dermatology/Dermatosurgery

Illuminating erythrasma: The significance of Wood's lamp fluorescence

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Received: 26 February 2025

Accepted: 22 April 2025

Published: 19 June 2025

DOI

10.25259/CSDM_43_2025

Quick Response Code:



A 41-year-old diabetic female presented with a complaint of discoloration in her underarms and groin for the past six months. She reported mild itching but denied any pain or discharge from the lesion. The symptoms progressively worsened, especially during summer. She had tried various over-the-counter creams with no improvement. On physical examination, well- to ill-defined, brownish, non-tender, non-purulent, scaly plaque was present in both armpits, which showed florescence on Wood's lamp examination [Figure 1a and b]. Similar lesion was also observed in bilateral groin, and it also fluoresced on Wood's lamp examination [Figure 2a-d]. The patient was



Figure 1: (a) Well-defined brownish plaque with mild scaling in the axilla. (b) Coral-red fluorescence in axilla.

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Figure 2: (a-c) Well- to ill-defined hyperpigmented plaques in the bilateral groin and lower abdominal crease. (d) Coral red fluorescence in the bilateral groin and lower abdominal crease.

diagnosed with erythrasma and was given 2% fusidic acid cream twice a day following which the skin lesions resolved within two weeks.

How to cite this article: Khan M, Garg S, Antakanavar GM, Dabas S. Illuminating erythrasma: The significance of Wood's lamp fluorescence. *CosmoDerma*. 2025;5:64. doi: 10.25259/CSDM_43_2025