EFFICACY AND SAFETY OF LULICONAZOLE (1%) CREAM VERSUS CLOTRIMAZOLE (1%) CREAM IN TINEA INFECTIONS OF SKIN-A COMPARATIVE STUDY

ABSTRACT:

INTRODUCTION:
Dermatophytosis is a common superficial fungal infection of the skin occurring in 20-25% population worldwide. Currently, topical azoles and allylamines are used for the treatment of tinea infections of skin with disadvantages like long duration of therapy, poor compliance and a high relapse rate. Luliconazole is a newer topical imidazole antifungal applied once daily and inhibits the ergosterol biosynthesis more effectively because the reservoir property in the stratum corneum is greater for luliconazole\textsuperscript{(13)}. The present study was done to compare the efficacy and safety of topical luliconazole versus topical clotrimazole in tinea infections of skin.

METHODS:
It is an open labeled randomized comparative trial carried out in OPD of Dermatology. Patients diagnosed with tinea corporis/tinea cruris were assigned to group 1 or 2 to receive 1% luliconazole cream OD for 2 weeks or 1% clotrimazole BD for 4 weeks. Skin scrapings were taken for mycological assessment. Clinical assessment, KOH mount and culture was done at each visit. Clinical and mycological cure were assessed at each visit. Efficacy parameters were analyzed using Mann Whitney U test and Wilcoxon signed rank rest.

RESULTS:
Totally 158 patients were screened, 104 were randomized, 4 withdrew consent after randomization, hence each group had 50 patients. At the end of first week, luliconazole 1% group showed significant improvement in clinical cure and mycological cure (p<0.05) than 1% clotrimazole group. Mycological cure was high in luliconazole group(p<0.05). Relapse was high in clotrimazole group(p <0.05).

CONCLUSION:
Topical luliconazole was better in achieving faster mycological and clinical cure with lower relapse.

KEYWORDS: Dermatophytosis, Luliconazole, Clotrimazole, Efficacy