

Trichoscopy and Tinea Capitis: Comma and Corkscrew Hairs

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Case Study

This dermoscopic image is from a non-scarring alopecia in a 6 years female African Child that started 2 months ago.

What is your diagnosis?

1. Alopecia areata?
2. Tinea capitis?
3. Trichotillomania?
4. Androgenic alopecia?
5. Lichen planopilaris?

This 6 years old female child, from Mayotte, presented a diffuse parietal alopecia with scaling since 2 months (Figure 1). Dermoscopic of hair scalp (Trichoscopy) shows comma hairs (Figure 2, circles) and corkscrew hair (Figure 2, squares) suggesting the diagnosis of Tinea Capitis (TC). Mycological cultures identified *Trichophyton tonsurans* infection. Treatment with griseofulvine leads to complete clinical (Figure 3) and dermoscopic (Figure 4) resolution of alopecia.

Comma-shaped hairs first reported by Slowinska [1] appeared to be a marker of TC and may represent an intermediate stage in evolution of TC before formation of dystrophic hairs. They were characterized by a sharp slanting end, homogeneous thickness, and pigmentation of the hair shaft. Corkscrew hair described by Hugues [2] showed more exaggerated coiled appearance of the hair shaft.

Trichoscopy is helpful in diagnosing various hair and scalp diseases [3] mainly *Androgenic alopecia* (Anisotrichia), *Alopecia areata* (Yellow and black dots, Exclamation Mark Hair), *Lichen planopilaris* (Perifollicular scalling, White dots and Perifollicular inflammation), *Trichotillomania* (curled and/or tulip hairs).

Figures



Figure 1: Non cicatricial and extensive alopecia.

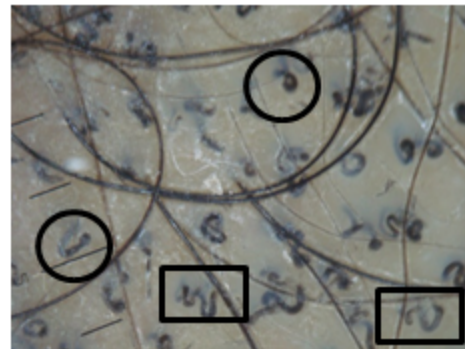


Figure 2: Comma Hair (Circles), Corkscrew Hair (Squares).



Figure 3: Clinical resolution of alopecia after two months treatment.



Figure 4: Normalization of trichoscopy after two months of treatment.

References

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