

Emerging Sexually Transmitted Infections Outbreak: Dermatophytoses among Men who Have Sex with Men in Milan, Italy

C. Maci¹; A. R. Raccagni¹; R. Lolatto¹; E. Messina²; D. Canetti²; C. Tassan Din²; M. d.C. Garcia Martearena¹; G. Torkjazi¹; M. Bottanelli¹; A. Castagna^{1,2}; S. Nozza^{1,2}

¹ Vita-Salute San Raffaele University, Milan, Italy ² IRCCS San Raffaele Scientific Institute, Milan, Italy

Introduction

Dermatophytoses are infections of the skin or adnexa, which are extremely widespread in the environment. Transmission can occur through both direct (i.e. human-to-human and animal-to-human contact or soil-to-human spread) and indirect contact with contaminated fomites. For instance, gyms and saunas represent environments which favour the persistence and contamination of moulds. Sexually transmitted infections (STIs) are a global public health threat. They are on the rise, especially among men who have sex with men (MSM).

Methods

This is a retrospective monocentric study including outpatients who were diagnosed with at least one episode of dermatophytosis between March 2010 and October 2023 at the Infectious Diseases Unit of San Raffaele Scientific Institute, Milan, Italy. Mycosis diagnosis was mainly clinical following the medical visit and physical examination (figure 1).

Results

Overall, 107 people were diagnosed with dermatophytosis between March 2010 and October 2023. All 56 cases observed since April 2022 included 55 MSM and 1 female; compared to before 2022 when there was a total diagnosis of 51 cases. The rising rate of observed mycosis is presented in Table 1: an outbreak of cases among MSM was noted.

Table 1

- A.** Epidemic curve of dermatophytosis in our cohort of outpatients from March 2010 (n=103). Outbreak of dermatophytosis from April 2022 to October 2023 (n=49).
B. Incidence of dermatophytosis diagnoses by quarters.



Figure 1 Erythematous lesions with oedema and pustules. (A) tinea cruris circinate erythematous lesions around groin hair. (B) tinea barbae a single circinate erythematous lesion. (C) tinea corporis several and extended erythematous lesions with oedema, pustules and xerosis on gluteal region. (D) tinea genitalis.

Conclusion

These results highlight the evident increase in the incidence of mycotic infections among sexually active individuals, among MSM. We are dealing with a new entity of sexually transmissible infections, in addition to the existing diseases that are being studied.

