



**University of North Carolina Wilmington
Abrons Student Health Center**

INSTRUCTION SHEET: RINGWORM

The Student Health Provider has diagnosed ringworm.

Ringworm is a superficial (not deep) fungal infection of the skin. Ringworm is a misleading term: Although the infection appears as ring-like patches, worms are not involved.

Ringworm begins as small, round, scaly, red spots on the skin. The spots enlarge slowly, with the center clearing: The patch becomes a red, scaly, raised ring surrounding normal skin.

The main symptom of ringworm infection is itching.

Treatment of ringworm infection of the skin involves application of anti-fungal cream.

Ringworm infection of the scalp and nails is more difficult to treat. Griseofulvin, a drug taken by mouth, is usually given for at least a month.

Ringworm is contagious. The infection is spread by contact with another person or animal (dog, cat, horse) that has ringworm.

MEASURES YOU SHOULD TAKE TO HELP TREAT YOUR RINGWORM INFECTION:

1. Apply a small amount of anti-fungal cream to each skin patch two to three times a day. Over-the-counter or prescription medications containing tolnaftate, clotrimazole, or miconazole can be used. Rub the cream onto the patch thoroughly. Improvement should show within a week, but several weeks may pass before the patch is gone.
2. Close contact with infected pets should be avoided. Infected pets should be treated for ringworm in the same manner as humans are treated.
3. Try not to use others' hats or combs, now or in the future.
4. If the skin lesions do not clear within several weeks, return to the Student Health Center or schedule a follow-up appointment with your personal/referral doctor. Treatment of scalp or nail infections with griseofulvin should be supervised closely, as side effects can occur.