

Tinea Manuum (a fungal skin infection) on hand or foot: very common, and treatable with topical medication (ointment/cream). If vigorous, treat with infusion (IV) drugs.



Tinea manuum



Tinea manuum

Acral Peeling Skin Syndrome is a genetic defective disease — very rare, still does not have a cure yet. Keep comfort with some topical meds.



Acral Peeling Skin Syndrome



Acral Peeling Skin Syndrome

To: Ms. Suong

July 12, 2025

Nashville, Tennessee

a professor of medicine

Cc: Dermatologist Physician: Dr. Nhu-Linh Tran (Formerly Emory University)

I have investigated the inflammation in your hand and found two matching disease names. Neither is contagious to other people; however, they can gradually spread to other areas of the same body part—specifically, the fingers in the hands and feet. You may experience soreness and discomfort.

Let's start with the rare one—Acral Peeling Skin Syndrome (fewer than 1,000 cases). It shares many symptoms with other conditions but is caused by a genetic defect, making it extremely rare. Currently, there's no cure. Treatment focuses on reducing pain using medications or ointments. Wearing special gloves can help prevent contact and exposure, especially during physical tasks. There are fewer than 1,000 known cases. I hope it's not what you're dealing with!

Caused by two defective genes: TGM5 & CSTA. See notes for a full list of temporary drugs and a direction for new treatment drug discovery.

The second one is very common: Tinea Manuum, or Ringworm of the hand, is a fungal infection treated with antifungal medications. Other notes: Treat it similarly to an allergy—maintain consistent use of medication and ointment. Symptoms may improve depending on environmental factors such as weather (heat or cold) and working conditions. Use special gloves to avoid contact and exposure, especially during manual work.

See a full list of the treatment drugs suggested by Yale Medical School. Also, a guide to choose an infusion (IV) drug based on our CYP2C19 metabolism enzyme gene.

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In both cases, I found an outstanding dermatologist- Dr. Nhu-Linh Tran. She was formerly a Professor of Medicine at Emory University's School of Medicine in Atlanta, Georgia, which is very close to us here in Nashville, Tennessee. She now runs a private clinic with several partners.

Dr. Tran is a friend of my younger sister, Dr. Cindy Ngan-Ha Vo, PharmD, whom she met while studying pharmacy in Atlanta. I also know Dr. Tran through her role as Vice President of the Vietnamese Medical Professional Association in the United States (Hội Y Nha Dược ở Mỹ). She earned her medical degree from Duke University School of Medicine.

Tell her that Winston Vo, an engineer, and his sister, Cindy Ngan-Ha Vo, PharmD- now living in Montreal, Quebec, Canada—are referring you to her.

As an Ivy League-trained chemical engineer with additional education in pharmacy school, I have taken a distinct and unconventional stance on disease and treatment. I advocate for a regenerative approach to cellular health and highlight the promising advancements in pharmacogenomics, a field that allows us to address diseases at the genetic level. This approach aims to reduce reliance on surgery and chemotherapy, which are increasingly overused. I've also attached a note that represents a unique and essential aspect of my medical research:

"Every cell undergoes deterioration or becomes tumorous and eventually dies, then regenerates. A clear example of this is our skin and the wound healing process. Therefore, cancer may be curable, and we should avoid the excessive use of chemotherapy, which is often widely abused in cancer treatment."

"Every Cell is going deteriorated (or tumors) and dying, then regenerates, most clearly example is our

my unique
& distinct stance

skin, and the wound healing process, so it cannot cure then don't destroy by Chemotherapy that is widespread abused in Cancer Treatment."

I was once in pharmacy school. Take a look at my recent article on LinkedIn: "While surgery is commonly used to treat brain injuries, it is not typically employed for brain tumors or cancer due to various unavoidable complexities. Should it be banned?"

Finally, returning to your case: These two conditions are associated with inflammation, as the cells are affected by either genetic defects or tumors. For everyone, it's important to strengthen the immune system to help eliminate these abnormalities and promote correction. Our body's cells have the ability to renew themselves and to be eliminated when necessary.

In addition to special nutritional medicines- administered according to guidelines set by the new Secretary of Health, RFK Jr., here are several additional steps you can take: Exercise regularly; Follow an anti-inflammatory diet; Prioritize sleep; Maintain adequate vitamin D levels. Further details are provided in the handout.

After reviewing this referral letter, you or your dermatologist, Dr. Nhu-Linh Tran, may call or email me at winston.vo@ecoGeneticHealth.com.

Thank you,

Winston Hieu-Duc Vo

Cell: (615) 484-3662

Email: winston.vo@ecoGeneticHealth.com

Education

- B.E. (Cum Laude) in Chemical Engineering & Applied Mathematics, Vanderbilt University (1998)
- Pharm.D. program (not completed), Duquesne University School of Pharmacy (Aug 2005 - May 2006)
- Pharmacist Intern, 4th Year (employment, not a rotation), University of Pittsburgh Medical Center- South Side (Dec 2005 - May 2006)

Founder

- **Ecosystem Habitat LLC** – a Trade Show, not a Store. On Social Media for Home Air Quality Monitoring and Air Purifier Machines. Website: <http://www.ecosystemhabitat.com>
- **EDGE Wellness Clinic – Save-a-DRUG**: A blog-based consultation platform on social media. Not intended for patient visits. Provides wellness insights and strategic reflection. Website: <http://www.solarwaveelectricity.com>



Dr. Nhu-Linh T. Tran, MD

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OVERVIEW

Dr. Tran graduated from the [Duke University School of Medicine](#) in 1991. Dr. Tran works in Atlanta, GA and 1 other location and specializes in Surgery, Dermatology and Dermatologic Surgery. Dr. Tran is affiliated with [Piedmont Mountinside Hospital](#).



PATIENT'S PERSPECTIVE

Takes time to answer my questions

Provides follow-up as needed

Based on patient feedback. [Read the reviews](#)

by Yale U- School of Medicine- A Complete Description and Treatment Plan for Tinea Manuum/ Ringworm Skin Infections.

1-877-YALEMDS

Ringworm (Tinea)

Overview

Tinea, a fungal skin infection, is commonly known as ringworm—owing to its typical appearance as an oval- or circular-shaped red rash. It is caused by a fungus that can infect the skin, fingernails, toenails, and/or hair. There are no worms involved.

Ringworm can appear on different body parts—arms and legs, hands or feet, trunk, scalp, genitals or groin area, and the face. There are different types of ringworm—and treatments—depending on the body part affected. For instance, ringworm of the hands and feet is called athlete's foot; ringworm of the groin or genital areas is called jock itch.

Ringworm can be contagious and spread from person to person, pet (especially puppies and kittens) to person, or surface to person. Because the fungus thrives in damp, warm areas, people can contract it while walking barefoot on a locker room floor or using a towel contaminated with the fungus.

There is no national public health surveillance for common fungal infections, such as ringworm, so it is not possible to know exactly how many people contract ringworm each year in the United States. However, it is considered a common condition and can affect anyone at any age. Being infected with ringworm is completely normal and does not indicate an altered or depressed immune system.

The good news is that antifungal medication can cure ringworm. The type and length of treatment vary, depending on the location and severity of the infection.

What is ringworm?

Ringworm is a fungal skin infection that causes redness, itching, and burning in the affected area(s). It is contagious and easily spreads in moist, hot areas where the fungus thrives.

When a person comes into contact with the fungus that causes ringworm, the part of their body that touched it may become infected. From there, the fungus multiplies and can spread easily, even to other body parts. For instance, a person with athlete's foot may later develop jock itch if their bare foot touches their underwear while getting dressed.

What causes ringworm?

Different fungi, including trichophyton, microsporum, and epidermophyton, cause ringworm.

What are the symptoms of ringworm?

Although people with ringworm may have fingernail or toenail infections, the hallmark symptom of the condition is a rash with the following characteristics:

- It contains rounded, red rashes (which may appear gray or brown on darker skin)
- It is scaly and/or contains pus-filled bumps
- It grows in size slowly
- It causes itchiness and a burning sensation
- It may cause temporary hair loss, if present on the scalp or beard

What are the risk factors for ringworm?

People may be at risk for ringworm infection if they:

- Have contact with a person or animal with ringworm
- Touch or wear clothing/towels used by a person with ringworm
- Use or touch combs, brushes, or other hair accessories touched by a person with ringworm of the scalp
- Remain in damp or sweaty clothing for long periods of time
- Stand or walk barefoot in a locker room, through a pool area, or in a shared shower where the fungus is present
- Spend time in hot, humid weather
- Wear tight-fitting clothing
- Have diabetes or weakened immune systems

Disinfectants or bleach can be used to kill ringworm on surfaces. Washing clothes, towels, and sheets in hot water with detergent should kill ringworm, as well as stop its spread.

How is ringworm diagnosed?

Doctors can diagnose ringworm after hearing a patient's medical history, performing a physical exam, and, sometimes, via diagnostic tests.

If you suspect you have ringworm, tell your doctor when you first noticed the rash and what symptoms you have experienced. It's helpful to share details about activities that may have exposed you to ringworm, such as using public pools, sharing a friend's workout towel, or caring for a child with ringworm.

During a physical exam, your doctor may diagnose ringworm simply by inspecting your rash. In some cases, the doctor may scrape some cells from the site of the rash or the area beneath an affected fingernail or toenail. The cells will later be examined under a microscope by your doctor or a pathologist to check for a fungal infection.

In rare cases, the doctor will use skin scrapings for a fungal culture, during which the cells are grown in a laboratory setting to identify the type of fungus present on the skin.

How is ringworm treated?

Over-the-counter (OTC) antifungal treatments are often all that is needed to eliminate many forms of ringworm, including jock itch and athlete's foot. These products come in cream, lotion, gel, spray, and powder forms. The fungal infection should disappear within two to four weeks. It's important to use the medication for the entire length of time listed on the product, even if the condition seems to have disappeared.

If OTC treatments don't cure ringworm within the time listed on the package, your doctor may prescribe one of the following medications, depending on the body part affected:

- Econazole
- Ketoconazole
- Ciclopirox
- Naftifine

It's important to note that ringworm on the scalp, beard, or nails typically doesn't respond to OTC treatment; this type of infection needs to be treated with prescription medication that must be taken orally each day for one to three months.

What is the outlook for people with ringworm?

OTC medications can generally treat many kinds of ringworm within two to four weeks; however, ringworm infections of the scalp, beard, or nails require oral medication that can take up to three months to treat.

The fungus that causes ringworm is contagious. Making lifestyle changes, such as wearing flip-flops on pool decks instead of walking barefoot, changing socks and underwear at least once each day, wearing socks with shoes, keeping your skin clean and dry, and washing your hands with soap after playing with or touching pets, may help lower the risk of getting ringworm again.

This article was medically reviewed by Yale Medicine dermatologist [Jeff Gelhausen, MD, PhD](#).

Evidence-Based Ways to Boost Your Immune System [↗](#)

Lifestyle Modifications: [↗](#)

- **Get enough sleep:** Aim for 7-9 hours of quality sleep per night. [↗](#)
- **Exercise regularly:** Engage in moderate-intensity exercise most days of the week. [↗](#)
- **Eat a healthy diet:** Consume plenty of fruits, vegetables, whole grains, lean protein, and healthy fats. [↗](#)
- **Manage stress:** Practice stress-reducing techniques such as yoga, meditation, or spending time in nature. [↗](#)
- **Avoid smoking and excessive alcohol consumption:** These habits weaken the immune system. [↗](#)

Nutritional Supplements: [↗](#)

- **Vitamin C:** Found in citrus fruits, berries, and leafy green vegetables.
- **Vitamin D:** Obtained from sunlight exposure or supplements.
- **Zinc:** Present in meat, poultry, nuts, and seeds.
- **Probiotics:** Found in yogurt, kefir, and sauerkraut.
- **Elderberry:** A berry with antiviral properties. [↗](#)

Other Recommendations: [↗](#)

- **Get vaccinated:** Stay up-to-date on recommended vaccinations. [↗](#)
- **Wash your hands frequently:** Use soap and water or hand sanitizer. [↗](#)
- **Avoid touching your face:** This can spread germs. [↗](#)
- **Cover your mouth and nose when coughing or sneezing:** Use a tissue or your elbow. [↗](#)
- **Get enough sunlight:** Vitamin D synthesis is crucial for immune function.



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[CYP2C19] - a coded Gene Drug Metabolism Enzyme

choose drug: Voriconazole

Applying Pharmacogenomics to Antifungal Selection and Dosing: Are We There Yet?

Not yet, but proved as needed for optimal & selection among its drug classes.

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Abstract

Purpose of Review—This review summarizes recent literature for applying pharmacogenomics to antifungal selection and dosing, providing an approach to implementing antifungal pharmacogenomics in clinical practice.

SIX classes of Antifungal drugs: AZOLES, echinocandins, polyenes, pyrimidine analogues, allylamines, & mitotic inhibitor

Recent Findings—The Clinical Pharmacogenetics Implementation Consortium published guidelines on *CYP2C19* and voriconazole, with recommendations to use alternative antifungals or adjust voriconazole dose with close therapeutic drug monitoring (TDM). Recent studies demonstrate an association between *CYP2C19* phenotype and voriconazole levels, clinical outcomes, and adverse events. Additionally, *CYP2C19*-guided preemptive dose adjustment demonstrated benefit in two prospective studies for prophylaxis. Pharmacokinetic–pharmacodynamic modeling studies have generated proposed voriconazole treatment doses based on *CYP2C19* phenotypes, with further validation studies needed.

Summary—Sufficient evidence is available for implementing *CYP2C19*-guided voriconazole selection and dosing among select patients at risk for invasive fungal infections. The institution needs appropriate infrastructure for pharmacogenomic testing, integration of results in the clinical decision process, with TDM confirmation of goal trough achievement, to integrate antifungal pharmacogenomics into routine clinical care.

Keywords

Invasive fungal disease; Antifungal; Pharmacogenomics; Dosing; Voriconazole; *CYP2C19*

Introduction

Invasive fungal infections (IFI) are important, life-threatening conditions. Although rare in immunocompetent hosts outside the intensive care unit, incidence is rising with growing

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Conflict of Interest Matthew A. Miller reports personal fees from Allergan outside the submitted work. Yee Ming Lee reports personal fees from Dynamed Plus (EBSCO Health) outside the submitted work.

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