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Letter to Editor

Appreciation for the Publication of A real-world observational study to evaluate the safety & effectiveness of Naftifine 2% cream in patients with superficial fungal skin infection in Indian patients and request for subgroup analysis

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Dear Editor, Indian Journal of Clinical and Experimental Dermatology.

I am writing to commend the recent publication of the real-world observational study on the use of Naftifine 2% cream in treating superficial fungal infections in Indian patients published in Indian Journal of Clinical and Experimental Dermatology 2024;10(3):260–265. The comprehensive data presented in the study is invaluable, as it offers a practical understanding of the efficacy and safety of Naftifine 2% in a real-world setting, addressing a common clinical challenge in dermatology.

The inclusion of a diverse patient cohort provides a strong foundation for the study's relevance, especially given the varying dermatological profiles (Superficial dermatophytosis) in the Indian population. It is heartening to see studies that focus on practical, real-world scenarios where treatment response can be influenced by numerous factors beyond the controlled conditions of clinical trials.

I would like to suggest, however, that a subgroup analysis be conducted and reported in a follow-up publication. Given the variability in patient demographics such as age, gender, co-morbidities, duration of the infection, effectiveness of

Naftifine when given alone vs in combination with oral anti-fungal preparation, if possible further deep analysis about which oral antifungal performed better with topical Naftifine, even once a day Naftifine which is recommended due to its fungicidal effect, as well as to potentially greater keratin binding and slower release from the SC¹ vs twice a day Naftifine, how Naftifine behaves in terms of efficacy in treatment naïves vs previously treated patients, analysis focusing on these factors could provide further insights into the specific patient populations that might benefit the most from Naftifine 2% treatment. Such an analysis would help clinicians make more informed decisions when selecting antifungal treatments for their patients.

Once again, I appreciate the efforts of the authors and the journal in bringing forth this important study, which has the potential to improve treatment outcomes for many patients suffering from superficial fungal infections in India.

Thank you for considering my request, and I look forward to further studies and analyses on this subject.

Sincerely,

Dr. Abhijit Trailokya - Head Medical affairs Indoco Remedies Ltd. Mumbai.


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