SUPPLEMENTAL TABLE 1. Epidemiologic, clinical features, treatments, and outcomes of *Trichophyton indotineae* infections in New York City

ID	EPIDEMIOLOGIC DATA				CLINICAL FEATURES			THERAPEUTICS				RESPONSE AT LAST FOLLOW UP
	AGE AND SEX	IMMUNOSUPPRESSIVE MEDICATIONS OR CONDITIONS	INTERNATIONAL TRAVEL HISTORY	INFECTIONS WITHIN HOUSEHOLD	DURATION (ONSET TO FIRST VISIT)	AFFECTED AREA	POTASSIUM HYDROXIDE (KOH) TEST OR SKIN BIOPSY	NON-ANTIFUNGAL	TOPICAL ANTIFUNGALS	ORAL ANTIFUNGALS	ORAL ANTIFUNGAL AT FOLLOW UP, RECURRENCE, OR RESOLUTION	
1	30M	None	Bangladesh 7 months before	Brother and wife had similar rash, but unsure diagnosis	12 months	Bilateral inguinal folds, chest, and back	Not applicable	Triamcinolone 0.1% ointment, triamcinolone 0.1% cream, permethrin, ivermectin	None	TRB: 6 weeks	Improving with TRB, recurred 2 months after stopping TRB ITC: 200 mg QD for 8 weeks	Lost to follow up
2	55F	Diabetes mellitus	Unknown	Unknown	2 weeks	Body, inguinal folds	Not applicable	Desonide ointment	NST	TRB: 2 weeks ITC 200 mg: 4 weeks	Resolved with ITC, recurred after stopping ITC, restarted ITC for 4 weeks	Lost to follow up
3	32M	None	Bangladesh	Unknown	Multiple episodes in the past	Bilateral inguinal fold, arms, legs, buttocks, left temple, left temporal scalp, right submental chin	Yes, positive for tinea	Permethrin cream	KCZ	TRB: 4 weeks ITC 200 mg: 2 weeks GSF: 8 weeks VRC: 4 weeks	Resolved with VRC, flared after stopping VRC, restarted VRC for 12 weeks	Improving with VRC
4	13F	None	Bangladesh	4, 5, 6, 14 are in the same family	1 month	Hands, thigh, back, face	None	None	KCZ	GSF: 24 weeks	Resolved with GSF, continue with QOD to TIW dosing until last family member is cleared	Resolved
5	11F	None	Bangladesh	4, 5, 6, 14 are in the same family	1 month	Face, bilateral hands	None	None	None	GSF: 6 weeks FLC 150 mg: 8 weeks FLC 200 mg: 8 weeks	Improving with FLC 200 mg (total of 22 weeks)	Improving
6	57M	None	Bangladesh	4, 5, 6, 14 are the same family	14 months	Bilateral axillae, groins, and right popliteal fossa	Potassium hydroxide test: positive for fungal elements	None	CTZ/BTM KCZ	ITC from Bangladesh ITC: 4 weeks GSF: 8 months	Improved with ITC, recurred after stopping ITC Improving with GSF for 8 months, continue with QOD dosing until last family member is cleared	Improving
7	29M	None	Bangladesh	Unknown	6 years	Bilateral buttock and inguinal folds	Shave Biopsy: spongiotic dermatitis Punch biopsy: tinea	Dupilumab for 8 weeks, triamcinolone 0.025% cream, halobetasol ointment, clobetasol ointment	CTZ KCZ CPX	TRB: 2 weeks ITC 200 mg: 12 weeks FLC: 4 weeks VRC: 4 weeks	No improvement	No improvement, referred to infectious disease specialist

BID: twice daily; CPX: ciclopirox; CTZ: clotrimazole; CTZ/BTM: clotrimazole-betamethasone; ECZ: econazole; FLC: fluconazole; GSF: griseofulvin; ID: identifier; ITC: itraconazole; KCZ: ketoconazole; MCZ: miconazole; NFT: naftifine; NYS: nystatin; QD: once daily; QOD: every other day; TIW: three times per week; TRB: terbinafine; VRC: voriconazole

SUPPLEMENTAL TABLE 1 CONTINUED. Epidemiologic, clinical features, treatments, and outcomes of *Trichophyton indotineae* infections in New York City

ID	EPIDEMIOLOGIC DATA				CLINICAL FEATURES			THERAPEUTICS				RESPONSE AT LAST FOLLOW UP
	AGE AND SEX	IMMUNOSUPPRESSIVE MEDICATIONS OR CONDITIONS	INTERNATIONAL TRAVEL HISTORY	INFECTIONS WITHIN HOUSEHOLD	DURATION (ONSET TO FIRST VISIT)	AFFECTED AREA	POTASSIUM HYDROXIDE (KOH) TEST OR SKIN BIOPSY	NON-ANTIFUNGAL	TOPICAL ANTIFUNGALS	ORAL ANTIFUNGALS	ORAL ANTIFUNGAL AT FOLLOW UP, RECURRENCE, OR RESOLUTION	
8	59M	None	Unknown	Unknown	3 to 4 months	Buttock, lower abdomen, thigh, pubic, groin	Biopsy: tinea	Hydrocortisone 1% cream, triamcinolone 0.1% cream	CTZ/BTM ECZ NFT	TRB: 3 months FLC 100 mg: 3 weeks ITC 100 mg: 4 weeks ITC: on and off, 8 weeks	No improvement with TRB and FLC Resolved with ITC after 4 weeks, recurred 2 weeks after stopping ITC, resolved with ITC 200 mg 2 weeks on and 2 weeks off for 2 cycles, and 4 weeks on and 2 weeks off for 2 cycles, recurred again 8 weeks after stopping ITC	Improving with ITC 100 mg for 12 weeks
9	63M	None	Unknown	Unknown	2 weeks	Ingroin folds, neck, chest, bilateral thigh	Biopsy: spongiotic dermatitis	Halobetasol ointment	KCZ CPX	TRB: 8 weeks GSF: 4 weeks ITC 200 mg: 4 weeks	Resolved with ITC, recurred after stopping ITC for 2 weeks, recurred with ITC 1 week on and 2 weeks off for 6 weeks, continued with ITC QD for 4 weeks	Lost to follow up
10	42F	None	Nepal	Unknown	2 years	Bilateral buttock	Biopsy: tinea	Tacrolimus 0.1% ointment	CTZ/BTM KCZ	ITC: 6 weeks	Resolved with ITC	Resolved
11	63F	None	Bangladesh	Unknown	6 months	Bilateral axillae, buttocks, lower abdominal folds, groin, chest	Biopsy: spongiotic dermatitis	Permethrin cream	None	TRB: 2 weeks ITC 200 mg: 8 weeks	Recurred 3 weeks after stopping ITC, resolved with ITC 100 mg for 8 weeks	Resolved
12	12F	None	Bangladesh	Mother had similar rash	18 months	Upper back, chest, bilateral upper inner thighs, abdomen	Biopsy: tinea	Doxycycline, halobetasol ointment	KCZ	GSF: 6 weeks	Resolved with GSF	Resolved
13	40F	None	Bangladesh	Unknown	18 months	Trunk, buttocks, bilateral upper and lower limbs, thighs, abdomen, face	Biopsy: tinea	Halobetasol ointment and doxycycline from Bangladesh	KCZ	TRB from Bangladesh ITC 200 mg: 8 weeks	Resolved with ITC after 8 weeks, recurred 6 weeks after stopping ITC, resolved with ITC for 8 weeks	Resolved
14	5F	None	Bangladesh	4, 5, 6, 14 are in the same family	1 month	Bilateral hands, face	None	None	None	GSF 125mg/5 mL, 5 mL BID for 3 months GSF 125mg/5 mL, 7.5 mL BID for 4 months	Resolved with GSF, continue with QOD dosing until last family member is cleared	Resolved

BID: twice daily; CPX: ciclopirox; CTZ: clotrimazole; CTZ/BTM: clotrimazole-betamethasone; ECZ: econazole; FLC: fluconazole; GSF: griseofulvin; ID: identifier; ITC: itraconazole; KCZ: ketoconazole; MCZ: miconazole; NFT: naftifine; NYS: nystatin; QD: once daily; QOD: every other day; TIW: three times per week; TRB: terbinafine; VRC: voriconazole

SUPPLEMENTAL TABLE 1 CONTINUED. Epidemiologic, clinical features, treatments, and outcomes of *Trichophyton indotineae* infections in New York City

ID	EPIDEMIOLOGIC DATA				CLINICAL FEATURES			THERAPEUTICS				RESPONSE AT LAST FOLLOW UP
	AGE AND SEX	IMMUNOSUPPRESSIVE MEDICATIONS OR CONDITIONS	INTERNATIONAL TRAVEL HISTORY	INFECTIONS WITHIN HOUSEHOLD	DURATION (ONSET TO FIRST VISIT)	AFFECTED AREA	POTASSIUM HYDROXIDE (KOH) TEST OR SKIN BIOPSY	NON-ANTIFUNGAL	TOPICAL ANTIFUNGALS	ORAL ANTIFUNGALS	ORAL ANTIFUNGAL AT FOLLOW UP, RECURRENCE, OR RESOLUTION	
15	33F	None	Unknown	Husband was treated for tinea	1 month	Bilateral arms, genitals, lower back, buttocks	None	Clobetasol ointment, tacrolimus ointment, hydrocortisone 2.5% ointment	KCZ	ITC 100 mg: 4 weeks	Lost to follow up	Lost to follow up
16	40M	Diabetes mellitus	Unknown	Unknown	2 weeks	Face, legs, inguinal folds	None	None	KCZ	ITC 200 mg: 8 weeks	Lost to follow up	Lost to follow up
17	28M	None	Bangladesh	Unknown	41 months	Groin	Biopsy 2 sites: both showed spongiotic dermatitis	Triamcinolone 0.1% cream, triamcinolone 0.025%	KCZ MCZ CTZ/BTM NYS TRB Dupilumab: 16 weeks Tapinarof cream Roflumilast cream	TRB from Bangladesh FLC: 1 week ITC 200 mg: 12 weeks	Improving with ITC, recurred when trying to taper ITC to twice weekly dosing Started VRC for 4 weeks	Improving with VRC
18	60F	None	Unknown	Unknown	3 months	Groin, buttock, thigh	None	Unknown steroid cream	KCZ	None	Lost to follow up	Lost to follow up
19	42M	None	Bangladesh	Unknown	18 months	Abdomen, groin, thigh	Patient self-reported prior biopsy from outside dermatologist that showed atopic dermatitis	None	None	ITC 200 mg: 8 weeks	Improving with ITC	Resolved
20	58M	None	India	Unknown	1 month	Abdomen, arms, groin	None	Triamcinolone 0.1% ointment, cephalexin, hydrocortisone cream 2.5%	KCZ TRB	TRB: 2 weeks ITC 200 mg: 2 weeks	Resolved with ITC, recurred after stopping ITC, restarted ITC 200 mg for 8 weeks	Improving with ITC

BID: twice daily; CPX: ciclopirox; CTZ: clotrimazole; CTZ/BTM: clotrimazole-betamethasone; ECZ: econazole; FLC: fluconazole; GSF: griseofulvin; ID: identifier; ITC: itraconazole; KCZ: ketoconazole; MCZ: miconazole; NFT: naftifine; NYS: nystatin; QD: once daily; QOD: every other day; TIW: three times per week; TRB: terbinafine; VRC: voriconazole