Warts Understanding and

treating the condition

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arts are hard rough lumps growing on the skin, or inside the mouth or genitals, caused by infection with the human papilloma virus (HPV). There are more than 150 types of HPV which cause different types of warts.

Warts are estimated to affect 10% of the population, with a higher prevalence in school-aged children and immunosuppressed patients, and a peak at 12-16 years of age. Usually, warts are a cosmetic concern, although they can be painful. Many warts dissapear on their own. However, some types of HPV have been associated with the development of malignancies. Malignant transformation is most common for genital warts and in people who are immunocompromised.

Infection

HPV is transmitted by direct or indirect contact. A person who has warts on their hands, for example, can spread the infection to other areas of their own body by scratching. Or, the virus can be transmitted indirectly by sharing a towel with the infected person. HPV virus has the ability to survive for prolonged periods of time outside the body. If the skin is damaged when it comes in contact with the virus, the infection is more likely to occur. The time between the infection and warts visibly appearing varies from one to 12 months, depending on the type of virus. Some researchers suspect that certain types of HPV can lie dormant for over three years.

Treatment

HPV is a stubborn infection: it can resist desiccation and freezing. Treatment can be difficult, with frequent failures and recurrences, because normal appearing skin near the wart or on other parts of the body may harbor the virus. Notably, 65% of warts are believed to dissapear on their own within two years. Hence, it may be worthwhile to simply wait and see. However, if the warts are causing physical or emotional discomfort, they should be treated. Also, if the warts are extensive, spreading, or painful, they should be treated right away.

Typically, treatment should start with the least painful, least expensive, and least time-consuming methods — with more expensive and invasive procedures reserved for reoccurring and extensive warts. The first line of therapy is the topical agents, particularly salicylic acid (liquid or plasters) which works by removing the dead surface skin cells with the virus. Many preparations are available over-the-counter (examples: Soluver, Compound W, Duofilm, Duoplant, Occlusal). These can be applied at home, and have cure rates that range from 70 to 80%. Ask your pharmacist to help you choose a product.

Apply salicylic acid according to package directions. If using liquid, cover the wart with a waterproof adhesive tape like duct tape or white athletic tape. After 2-3 days, soak the area in warm water, then scrape

away the dead gray/white skin with a pumice stone or metal nail file. Make sure

to scrape gently, to avoid scarring. Repeat treatment until the wart has disappeared. Duct tape alone can also work in some cases. If the wart does not completely disappear within 2-3 months, or recurs, see your doctor.

There are several treatments that can be applied only in a physician's office. Liquid nitrogen cryotherapy is most commonly used in those who can tolerate the pain. This treatment is repeated every 2-4 weeks for at least 3 months, and then reassessed. The cure rates are 50 to 80%. If the warts are resistant, many other treatments are available, including cantharidin, DPCP, topical vitamin A acid, lasers (pulseddye and carbon dioxide), bleomycin injections into the warts, immunotherapy and surgery. All these options must be used with caution and by experienced physicians.

Genital warts

If you have genital warts, you must see your doctor. Genital warts have a small potential of becoming malignant and may be associated with sexually-transmitted diseases. A proper evaluation and treatment are necessary. Effective treatments are available. Please let your doctor know if you are pregnant or planning to become pregnant, as some of the treatment options are harmful to a growing baby. Vaccination against HPV types that causes genital warts is now available for girls eight to 26 years of age.

Types of warts

Common warts present as 1-10 mm hard bumps with a rough scaly surface, most commonly on the hands and knees.

Filiform warts are thin long growths, often noted around the lips, eyelids or nostrils.

Flat warts are 1-5 mm in diameter, flat to slightly-elevated, skin-colored bumps that are relatively smooth and most commonly found on the face, hands and shins.

Plantar warts develop as deep in-growths on the feet. These warts can be painful and impair walking.

Genital warts appear around the genitals and anus. They can look like common warts or be small skin-coloured bumps. These warts have a small chance of becoming cancerous.

