

Warts

(verrucae)



Background:

•Caused by a virus – Human Papillomavirus (HPV)

•Transmitted by direct contact, autoinoculation, and fomites

•Genital warts also transmitted perinatally and by sexual contact

•Majority self-resolve within 1-2 years

Types of warts:

<u>Common warts</u> – rough papules with black dots (thrombosed capillaries) beneath surface

<u>Plantar warts</u> – similar to common warts, on plantar surface, often flat, can be painful

<u>Flat warts</u> – small, skin colored, slightly raised, not rough, usually on hands or face

<u>Genital warts</u> – moist, fleshy, papillomatous, sometimes cauliflower-like, 90% preventable with HPV vaccine

Treatment: At home (non-genital)

- Topical salicylic acid
 - ✓ Higher % for thicker skin (e.g. 27-40% for palms and soles)
 - ✓ Soak wart, rub down with pumice stone, apply medicine, cover (e.g. duct tape)
 - ✓ Apply daily

Treatment: At doctor's office (non-genital)

Topical liquid nitrogen – freezes wart, stings, causes blister, repeat in weeks to months

➤Topical cantharidin – causes blister, repeat in weeks to months – may lead to ring wart

➤Topical tretinoin or imiquimod – for flat warts or warts on face, causes irritation, apply daily