



PODIATRY

Foot & Practice

A foot health message from
Bayswater Allied Health

Warts



SYMPTOMS AND TREATMENT OF WARTS

Common in children, teens and immunocompromised patients, warts are associated with the human papilloma virus (HPV), which stimulates an abundance of keratin in the epidermis. It can take weeks or months for warts to manifest after initial infection and they usually appear on the hands, face, legs and feet. There are many different types of warts affecting various parts of the anatomy, this article covers warts affecting the feet and legs. Warts are highly contagious and easily contracted through skin-to-skin contact, making surfaces such as flooring in sports changing rooms and around swimming pools ideal environments for the spread of the virus. The virus is easily transmitted from foot to foot from skin cells lingering on warm, damp surfaces..

Symptoms

Warts range in size from 1 mm to >1 cm in diameter and can occur in isolation or in groups, sometimes clustering to form a mosaic wart. Some patients may present with biomechanical changes as a result of warts on the feet.

Common warts are round and firm, with a rough, uneven surface similar to a cauliflower and are usually found on the knees. Common warts are rarely painful.

Plane warts are common on the legs and are most often found in young children, however they can be spread through shaving in older patients. Plane warts are yellowish in colour, smooth and round in shape, with a flat top, they are generally harmless, but can occur in large clusters of hundreds of warts.

Plantar warts affecting the feet —otherwise known as verrucas —usually appear flat on the surface of the skin. Plantar warts are distinctive due to the presence of one or more clotted blood vessels that resemble black pin pricks in the centre of the wart. Due to force and body weight on the soles of the feet plantar warts can grow inwards, which may cause pain or itching.

Periungal warts grow under the toenails and can be painful as they alter the natural growth of the nail and can cause onychomycosis.

Treatment

Warts are generally benign and resolve without the need for treatment. However, patients may wish to have warts removed, particularly if they are painful or embarrassing. There are many treatment options to remove warts. These include: topical applications of salicylic acid, chemical treatments and cryotherapy. Your podiatrist can assist in identifying the most appropriate treatment.' option.

Salicylic acid: over-the-counter creams and gels containing salicylic acid have been shown to be effective for the removal of warts on the feet and legs. The treatments are usually easy to apply and to self-administer for at-home care. Immunocompromised patients or those with circulatory disorders should avoid salicylic acid treatments as these medications can damage healthy skin as well as the infection and may in turn cause more serious injury.

Cryotherapy: freezing the wart is an effective clinical treatment that has fewer side effects on surrounding healthy tissue. Cryotherapy can be painful and potential side effects include pigmentation problems when used on skin (particularly on dark skin) and nail abnormalities when used for periungual warts.

Chemical treatments: topical treatments containing formaldehyde, glutaraldehyde or podophyllin can be prescribed for wart removal. Side effects include staining of the skin, swelling and secondary infection. Chemical treatments should not be made available to pregnant women.

Laser and surgery: laser treatments and surgical interventions will remove warts, but will not prevent recurrence of the infection.

Warts should be checked for bleeding or other injury for the prevention of secondary infection and further spread of the virus to other parts of the body or to other patients.

Patient education should include information on virus spread and prevention. The HPV virus can remain in the system for as long as two years and is difficult to suppress, making recurrence a possibility, regardless of treatment.



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