Warts and Verrucas

Warts are extremely common – almost everyone will have at least one in their lifetime, and 1 in 3 children and young people have them at any one time. They are not harmful, but can occasionally be sore, particularly if they are on a pressure area on the foot.

Treatment Options

No Treatment

Warts do not need treating if they are not causing any problems. They will go away eventually on their own, (half will go within a year, two thirds will go within 2 years). They tend to go away more quickly in children and young people. Even the most successful treatments have at best a 50-70% cure rate at 3 months (with 25% going away on their own in that timescale)

Salicylic acid paints and lotions

This works by dissolving the skin cells on the top layer of the wart. Common products used include paints, lotions, and come in different strengths. You can buy them over the counter at a pharmacy. Read the instructions on the packet for how to use them.

You need to use it daily for at least 3 months, often longer if it has only reduced in size. You should remove the dead skin cells from the top of the wart with an emery board or pumice stone before applying it each time. Soaking it in warm water for 5-10 mins before applying the salicylic acid may make it more effective. Do not use salicylic acid on the face, as it can cause irritation there and rarely cause scarring. Salicylic acid will irritate surrounding skin, so just apply it to the wart itself

Salicylic acid plasters

As above, but cut the plaster to the size of the wart and apply it overnight. Remove it in the morning, and repeat this for 3 consecutive nights, then after the third night you should be able to remove plenty of dead skin from the surface.

For the next 4 nights, apply flexitol heel balm, or another preparation containing urea, and repeat the salicylic acid plasters for three nights weekly as above.

Cryotherapy (freezing treatment)

Liquid nitrogen can be used to freeze warts. However, this often takes multiple treatments, about a fortnight apart, and is painful. Cure rates are not any better than for salicylic acid. There is a risk of permanent white marks being left on the skin, and also a risk of damage to underlying structures, so this is not suitable for some areas of the body.

We do not offer routine treatment of warts with cryotherapy at Stoke Road Surgery.

Other treatments

Glutaraldehyde (marketed as Glutarol), and **formaldehyde** (marketed as Veracur gel) preparations can be bought over the counter and are used in much the same way as salicylic acid.

Duct tape can be used. This is put over the wart to cover it up completely. This probably works by making the skin get a bit damp and softening the top layer of skin, so it can be more easily removed. Duct tape can be used over the top of salicylic acid. The tape should be changed after 6 days, or when it starts to come unstuck, and then the wart should be filed down and a new piece applied after a day uncovered.

Silver nitrate sticks (marketed as Avoca) are available at pharmacies for treatment of warts. They may be effective, but you must be extremely careful not to get any on the surrounding skin, and they may occasionally leave a permanent or long lasting black mark on the skin. They should be disposed of very carefully, as they are caustic to skin.

Needling is a newer technique, where lots of small needles are stuck into the wart. This causes some damage, and alerts the immune system to the presence of the wart virus so it can be cleared. Needling has been shown to be quite effective in early studies, and often treating one wart like this results in all the warts disappearing. It is offered in various clinics around Cheltenham and Bishops Cleeve, (eg the village clinic, Tarlings yard 01242 673507)but not at the GP surgery.

Thuja tablets, and **turmeric** (made into a paste and applied under a plaster or duct tape) have both been suggested as options but there is no evidence for their effectiveness.

Freezing sprays available from the pharmacy can also be purchased. These are probably less effective than liquid nitrogen treatment.

Surgery to remove warts is very occasionally done but there is a risk of the wart recurring in the scar afterwards, so this is generally best avoided.

Specialist treatments (not available on NHS) may include light therapy (called photodynamic therapy), laser therapy, creams to try and kill the virus, creams which are normally used to treat skin cancers and precancerous lesions (although warts are not cancerous or precancerous themselves), and creams derived from the blister beetle (cantharidin). These can be accessed by contacting one of the private hospitals or clinics and asking for details. (eg Nuffield Cheltenham 01242 246552, Winfield Gloucester 01452 306009, Sk:n Cheltenham 0800 8223305)

Warts and Swimming

Swimming is a vital skill which can save your life. Children with warts or verrucas should go swimming as normal. You can cover warts when swimming if you prefer, but the wart virus is pretty much everywhere anyway, and most people do not bother. Wearing flip flops at poolside and in communal showers and changing rooms might reduce the chance of spreading or catching verrucas.