

Referral Support Service

Dermatology

D20 Warts

Definition

- Warts are growths of the skin caused by infection with human papillomavirus (HPV).
- They are especially common in childhood and are spread by direct contact or autoinoculation.
- They are self-limiting and there are no easy or guaranteed treatments or magic cures.

Exclude Red Flag Symptoms

- Consider Squamous Cell Carcinoma (SCC) if solitary wart over age 40.
- Consider immunosuppression if new onset of warts in adulthood.

Management

Treatment options in primary care:

CKS recommend that facial warts should not be routinely treated in primary care because:

- There is a risk that treatment with salicylic acid or cryotherapy with liquid nitrogen may cause severe irritation and possible scarring.
- Treatment with topical salicylic acid is specifically contraindicated for use on the face [[BNF 68, 2014](#)].
- No treatment as 90% of warts in children will resolve in 2 years. In adults they can be more persistent but will resolve eventually (can take 5-10 years).
- Occlusion (for example duct tape) therapy and treatment with silver nitrate are NOT recommended, there is insufficient evidence that these treatments are effective for warts.
- Topical **salicylic acid 15%-50%** are available on prescription or OTC. Should be used for at least 3 months alongside paring of the wart with an emery board or pumice stone. Use weaker strengths (<17%) for plane warts on the back of the hands, as scarring is more likely to occur.
- Over the counter OTC cryotherapy (eg. **Wartner®**) or referral to private clinic for cryotherapy
- Combination with **salicylic acid** and cryotherapy can be used if required.

Generally warts should not be referred to Dermatology except:

- Persistent facial warts causing psychological distress
- Immunosuppressed patients
- Doubt about diagnosis

Genital warts should be referred to GU clinic.

Referral Information

Information to include in referral letter

- Any treatments tried in primary care
- **A photograph is desirable** if solitary lesion
- Relevant past medical/surgical history
- Current regular medication
- BMI/Smoking status

Investigations prior to referral

- No investigations needed.

Patient information leaflets/ PDAs

- Good information for patients at:
<http://www.patient.co.uk/health/warts-and-verrucae>

References

- <http://www.dermnetnz.org/viral/viral-warts.html>
- <http://www.pcds.org.uk/clinical-guidance/warts>
- [NICE CKS Warts and Verrucae](#) (Dec 2014)