

LASER VAPORISATION

Laser Vaporisation is an ablative treatment, achieved by applying laser radiation that results in burnt tissue (carbonized). The burned tissue will separate from the healthy tissue underneath and fall off during the following days. This treatment is best for smaller persistent warts. In this method, the continuous laser radiation removes the whole wart as well as some of the surrounding tissue to make sure the wart, its roots and blood supply are completely eradicated. This treatment is performed under local anaesthetic.

LASER SURGICAL EXCISION

Often reserved for deeper resistant plantar warts, this surgical procedure is performed under local anaesthetic. The wart is excised surgically ensuring not to penetrate the deep layer of skin known as the dermis. Then continuous laser radiation is used to vaporise any remaining viral wart tissue to ensure its roots and blood supply are completely eradicated. This will require regular dressing until the wound has fully healed.

CURETTAGE SURGERY

The wart is excised to include the healthy skin margins. The incision is through the full thickness of the skin but no deeper. The Podiatrist will avoid cutting into the next layer called the dermis, as this is more likely to cause scarring. A surgical instrument called a curette is then used to loosen underneath the wart so it can be scooped out as one piece. Phenol (mild acid) is then applied on the dermis where the wart was sitting to 'mop up' any viral particles remaining. This will require regular dressing until the wound has fully healed.



The Foot & Ankle Clinic[®]
Podiatry and Footwear

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Podiatry & Warts



Put your feet in the
hands of TFAAC for the
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Warts are lumpy growths in the skin caused by infection from the human papilloma virus, of which there are now more than 100 known types that are responsible for the many different types of warts.

Common warts seen on the feet are mosaic and plantar warts which are often deeper and resistant to pharmacy preparations.

Mosaic warts – these appear as a group of tightly clustered warts. The hands and soles of the feet are most commonly affected.

Plantar warts – these look like hard bumps, and can have tiny black dots on them. The soles of the feet are most commonly affected.

Warts are common, particularly in childhood. Some estimates suggest that up to one in five children have warts, with children aged 12 to 16 years most commonly affected.

RISK FACTORS FOR WARTS

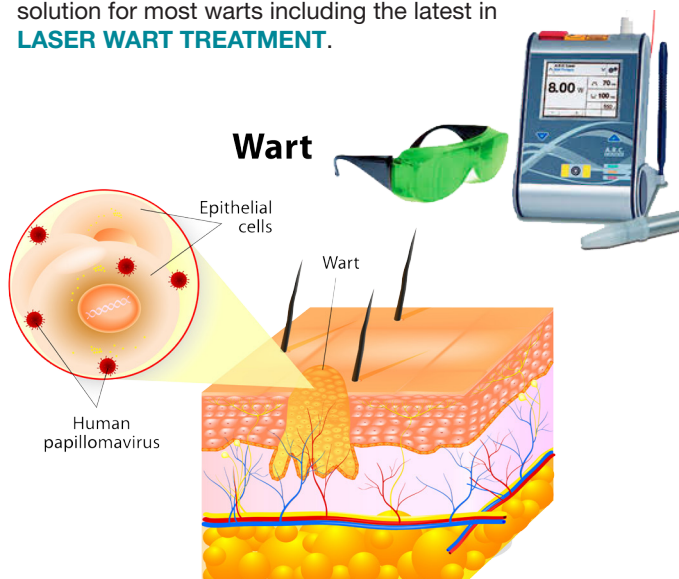
Anyone can develop warts, but factors that increase the risk include:

- immune deficiency
- injuries to the skin
- skin infections that break the skin surface
- frequently getting the feet wet
- hands or feet that sweat heavily (hyperhidrosis)
- swimming in public swimming pools
- direct contact with other people's warts
- scratching or shaving your own warts, which can spread the infection to other areas of your body.

Wart treatments offered at TFAAC:

Warts can be very stubborn and difficult to treat. In some cases they can go away on their own as a person's immune system provides its natural defence. However in many situations this is unfortunately not the case. Warts on the feet in particular can often be painful and make walking and weight bearing activity difficult. Also in certain cases while we ignore or wait for them to disappear on their own they can spread throughout the body or get larger.

TFAAC have been treating warts for over 20 years and we have developed an extensive range of treatments designed to treat the most stubborn warts. Ranging from conservative treatments through to the more invasive treatments, such as surgery, TFAAC has a treatment solution for most warts including the latest in **LASER WART TREATMENT.**



CANTHARONE & OCCLUSIVE ACID TREATMENTS

Cantharone is a potent topically applied medicine that is used for the removal of warts and skin tags. It's a painless, non invasive application, which makes it great for use on children. Cantharone causes a blister to form after it has been applied. Its effectiveness against warts is presumed to result from the "exfoliation" of the wart from the deeper layer of skin called the dermis.

CRYOTHERAPY

The warts are frozen with liquid nitrogen resulting in a cold burn which invokes an immune response to the HPV virus. It may take several regular cryotherapy treatments to get rid of warts and can be painful on large warts.

LOW-LEVEL LASER

Pulsed laser radiation targets the small blood vessels sustaining the wart. Upon intense laser irradiation a wart should dry out as its entire capillary chain fully coagulates. This will appear as a color transformation from pink to light grey. This is a powerful treatment for larger mosaic warts, it typically doesn't require any anaesthetic but may need a further treatment depending on the response.

