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Warts and their homoeopathic Treatment: A Comprehensive review

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Abstract

Warts are benign proliferations of the skin resulting from infection with the human papillomavirus (HPV)¹. The skin is often considered a reflection of internal health and disruption of physiological balance may manifest through cutaneous growth such as warts. Although warts can occur at any age, they are most frequently observed in children and adolescents. Clinically, they may present as solitary or multiple lesions and are classified within the miasmatic concept of sycosis in Homoeopathy². Their evaluation encompasses local symptomatology, Morphological features, Anatomical distribution, and the constitutional and Psychological characteristics of the affected individual³. Transmission occurs through direct contact, fomites, or autoinoculation, with higher prevalence in immunocompromised individuals. Types includes Common, Plane, Filiform, Plantar, and genital Warts. While conventional management includes Keratolytics, Cryotherapy, and surgical methods. From these there are chances of recurrence and discomfort. Homoeopathy offers a holistic approach, emphasizing individualized treatment through remedies such as Thuja Occidentalis, Nitric Acid, Causticum, Natrum Muriaticum, and Dulcamara, each suited to particular morphology and constitutions. This provides a comprehensive understanding of the clinical presentation, pathophysiology, and Homoeopathic management of Warts by considering local manifestations and underlying susceptibility.

Keywords: Warts, Human papillomavirus (HPV), Cutaneous growth, Children and adolescents, Sycosis, Morphology, Anatomical distribution, Psychological characteristics

Introduction

Warts are the growth of skin resulting from Human papillomavirus (HPV) infection. The source of infection is by direct or close contact. The risk of infection is significantly higher in individuals with Impaired cell mediated immunity, patient with Hodgkins disease, Malignant Lymphomas and Lymphocytic Leukaemia demonstrate increased susceptibility and tend to develop numerous lesions ^[4].

The Different varieties of Warts includes

- **Common Warts (Verruca Vulgaris):** Characterised by firm skin coloured Papules of variable size, commonly appearing on the Dorsum of hands and fingers ^[5].
- **Plane Warts (Verruca Plana):** Presents as skin coloured, slightly raised flat- topped Papules present on the Dorsum of hand and face ^[6]
- **Filiform warts:** Finger like projections with an irregular surface, usually seen on the neck, face and scalp ^[7].
- **Plantar Warts:** Found on any part of the Sole, presenting as well-defined Skin coloured areas with irregular surfaces ^[8].
- **Genital Warts:** Transmitted through sexual contact, manifesting as variable-sized Papillary or Cauliflower-like lesions.

The Verruca Vulgaris often appears in children with Hereditary Sycosis, particularly during secondary dentition. The Verruca Filiformis may emerge as a Tertiary lesion in acquired form of sycosis, while Verruca Plana juvenilis represents a hereditary form found on Back of hands and Face of children and adolescents.

Pathophysiology

HPV enters through micro abrasions of epidermis, infecting basal keratinocytes. Following infection, Viral proteins are expressed in two stages:

- **Early proteins (E1-E7):** Promotes Viral replication and cell proliferation.
- **Late proteins (L1/L2):** Assist in viral assembly

The Viral E6 and E7 oncoproteins disrupt tumour suppressor proteins p53 and pRb, resulting in unchecked keratinocyte proliferation. This process culminates in epidermal thickening and the development of Papillomatous lesions.

Type	Appearance and Texture	Location
Plantar Wart	Flat, grows inward, mosaic clusters	Soles of foot
Flat Wart	Small, smooth, flat-topped, clustered	Face, legs, arms
Common Wart	Rough, fleshy bumps with black dots	Hands, fingers
Filiform Wart	Thread-like projections	Face, neck
Peri/Subungual Wart	Rough papules near nails	Around/under nails
Genital Wart	Cauliflower-like clusters, variable colour	Genitals, anus

Diagnostic Criteria

Clinical examination: Inspect for papillomatous growth, skin line interruption, pinpoint bleeding ^[12]

Dermoscopy: frogspawn pattern and vascular structures like dotted vessels, linear or hairpin vessels, central red or black dots surrounded by white halos ^[13]

Differential Diagnosis

- Molluscum Contagiosum – central umbilication, pearly surface
- Seborrheic keratosis – stuck on look, cysts ^[1]
- Callus/corn – Preserved skin lines, no capillary dots
- Squamous papilloma – Pedunculated, Cauliflower like in mouth region
- Lichen Planus – Based on colour, distribution, lack of hyperkeratosis

Complications

- Recurrence is common in one third of cases
- Pain and discomfort
- Secondary infection due to scratching
- Psychological and cosmetic impact ^[9]
- Rare malignant transformation ^[6]
- Genital or oral warts spreads to partners or infants during childbirth

Homoeopathic Approach

In Homoeopathy, Patient was treated as a whole. Treatment is based not only on local manifestations but also on mental, physical generals. symptoms are evaluated according to their intensity and the Totality of symptoms guides the selection of the similimum ^[14].

Warts are considered as One-sided diseases often presenting with limited symptoms. They are again classified as External local maladies ^[15].

1. **Thuja occidentalis:** Warts may occur on any part of the body. Certain forms present with narrow bases, termed Fig-Warts or Tubular Warts, which maintain uniform thickness throughout their projection. Some are described as “Mother’s marks”. Other variants include hard, cleft, and seedy Warts as well as black, sessile Warts particularly observed on scalp. This remedy changes the sycotic constitution, to change the soil on which this poison grows. Warts appear on genitals, anus, perineum, and upon mucous surface. These warts

Causative Factors

- HPV strain infects the top layer of skin through tiny breaks ^[9]
- Indirect transmission through fomites
- Lower immunity
- Children and teenagers are more prone due to developing immunity ^[10]
- Lifestyle and stress like lower sleep, chronic stress, smoking, alcohol use

may have a seedy look, or may be of a cauliflower shape. Cauliflower like excrescences upon the cervix uteri. Brownish Warts and liver-like spots frequently occur on the abdomen.

2. **Nitric acid:** Warts and Condylomata may present in sycotic or syphilitic forms. They are typically large, jagged and pedunculated, often bleeding easily upon contact or washing. Such lesions are usually moist, exuding discharge, and associated with sticking pain. Commonly affected sites include the mucous membranes of the oral cavity, nasal passages, rectum, anus, urethra, and vagina.
3. **Causticum:** The Warts are hard, dry and horny in consistency, Characteristic copious thick tenacious, and adhesive discharges from the mucous membrane. It produces Large, jagged, often pedunculated, bleeding easily on tips of fingers and the nose. exuding moisture, small, all over the body, on eyelids, face, on the nose. It is beneficial in hypertrophy of the papillae when localised on the hand and face.
4. **Natrum muriaticum:** Warts on palms of hands especially if the person has greasy skin, oily on hairy parts.
5. **Dulcamara:** Warts big, smooth on face or hands & fingers, often seen in damp weather

Conflict of Interest

Not available

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Not available

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