

It was a pleasure seeing you today. I hope that I was able to answer all of your questions. My goal is to partner with you to help you meet your healthcare needs. If you would like to schedule another appointment with me, please **call 763-421-7300.** Have a great day!



Allison Willkom, DPM

Plantar Wart (Verruca Plantaris)

What Is a Plantar Wart?

A wart is a small growth on the skin that develops when the skin is infected by a virus. Warts can develop anywhere on the foot, but they typically appear on the bottom (plantar side) of the foot. Since this is a weightbearing area (I.e., area of pressure), the warts grow inward and are often tender and painful. Plantar warts most commonly occur in children, adolescents, and the elderly.



There are two types of plantar warts:

* A *solitary* wart is a single wart. It often increases in size and may eventually multiply, forming additional satellite warts.
* *Mosaic* warts are a cluster of several small warts growing closely together in one area. Mosaic warts are more difficult to treat than solitary warts.

Causes

Plantar warts are caused by direct contact with the human papilloma virus (HPV). This is the same virus that causes warts on other areas of the body.

Symptoms

The symptoms of a plantar wart may include:

* **Thickened skin.** A plantar wart often resembles a callus because of its tough, thick tissue.
* **Pain.** Walking and standing may be painful. Squeezing the sides of the wart may also cause pain.
* **Tiny black dots.** These often appear on the surface of the wart. The dots are actually dried blood contained in the capillaries (tiny blood vessels). Plantar warts grow deep into the skin. Usually, this growth occurs slowly with the wart starting small and becoming larger over time.

Diagnosis & Treatment

To diagnose a plantar wart, the foot and ankle surgeon will examine the patient’s foot and look for signs and symptoms of a wart.

Although plantar warts may eventually clear up on their own, most patients desire faster relief. There are many ways of treating plantar warts, all of which involve destroying the wart. However, despite the many treatment options, so far, there is not a perfect treatment.

**Patient-driven treatment options (may take several weeks to months) include**:

* Topical application of wart-destroying medicine, such as **Mediplast** or **Duofilm**. Applicaton instructions as follows:
* At bedtime, put a tiny amount of medicine exactly on your warts as directed. Put the medicine only on the warts, as it may irritate normal skin.
* If the medicine is a liquid, let it dry for 5 minutes so it won’t spread to normal skin when covered with tape.
* Cover your wart with waterproof adhesive tape (athletic or duct tape). The tape keeps your skin moist, which then softens the surface of the wart so the medicine will penetrate it.
* In the morning, remove the adhesive tape. Repeat daily.
* After a few days, the outside of the wart will start to turn gray. This means the chemical has begun to destroy it. Scrape the gray wart tissue off with a metal nail or pumice stone every second or third day. Do the scraping in or after a shower, while the wart’s tissue is still soft. Be sure to remove every bit of the dead wart tissue, otherwise, it will keep the wart-destroying medicine from reaching the living tissue underneath. Whatever you use for scraping your wart should not be used for anything else, because warts are somewhat contagious.
* If the wart becomes sore, stop the treatment for a few days.
* If you don’t see much progress after 2-3 weeks, try leaving the tape on until noon, or longer. Stubborn warts may need to be covered continuously with tape for 5 days. Leave medicine off for 2 days. Then reapply.
* If your plantar warts hurt when you stand or walk, wear an offloading pad (like a horseshoe/U-shaped pad sold at “myfootshop.com”) to take the pressure off the area.
* Continue the treatment until you believe the warts are gone. If you see the lines of your skin crossing the treated area, the warts are probably gone. If after you stop treatment the warts are still present – it happens – treat them again until you are more certain that the wart is gone.
* If wart persists despite home therapy, or if your wart becomes more painful or infected, see your foot and ankle specialist.

**Provider-driven treatment options:** The foot and ankle surgeon may use topical or oral treatments, laser therapy, cryotherapy (freezing), acid treatments or surgery to remove the wart.

* Cantharidin Instructions: Cantharidin is a blistering solution often used by podiatrists to resolve plantar warts. Because it is a blistering solution, it often causes redness, swelling, and fluid accumulation under the lesion.
* Wash the treatment area with soap and water 2-4 hours after treatment. There should be a film over the treated area after washing. DO NOT SCRUB the area, as this will violate the desired film formation.
* Blistering will start to form in about 3-8 hours post treatment for most people.
* Some people may be very sensitive to the medication and experience a tingling or burning sensation at the treatment site. Tylenol or Advil may be taken for discomfort.
* In 1-2 weeks, crusting, scabbing, and peeling should occur. Vaseline may be applied using a Q-tip to help the healing process.
* If the area becomes very red, painful to touch, and/or looks infected, please contact the clinic at 612-788-8778.
* Your provider will see you back usually in 2 weeks for repeat debridement and evaluation of the lesion. Multiple treatments may be necessary to effectively clear the plantar wart.

Regardless of the treatment approaches undertaken, it is important that the patient follow the surgeon’s instructions, including all home care and medication that has been prescribed, as well as follow-up visits with the surgeon. Warts may return, requiring further treatment.

If there is no response to treatment, further diagnostic evaluation may be necessary. In such cases, the surgeon can perform a biopsy to rule out other potential causes for the growth.

Although many folk remedies for warts exist, patients should be aware that these remain unproven and may be dangerous. Patients should never try to remove warts themselves. This can do more harm than good.

https://www.foothealthfacts.org/conditions/plantar-wart-(verruca-plantaris)