

Wart(viral lecture 2)

—Human papilloma virus.

Clinical types:

- Common Warts .
- Plane Wart.
- Digitate & Filiform.
- Planter wart.

Common wart

- ✓ Can occur at any sites.
- ✓ Hyperkeratotic, exophytic, dome-shaped papules or plaques.
- ✓ Most frequently located on the fingers and dorsal surfaces of the hands.

common wart

- Viral infection.
- Occur at any sites.
- Skin marking is broken.

- No line of cleavage between the wart and the surrounding skin.
- Rough surface.
- More painful with pressure between fingers

▪ **corn**

- Reactional state.
- Occur at pressure sites against bone.
- Skin marking is preserved.
- There is line of cleavage between the wart and the skin.
- Smooth surface.
- More painful with downward pressure.

Plane Wart

Are skin-colored or pinkish to brown, relatively smooth surfaced, flat-topped papules that are most commonly located on the dorsal hands, arms or face.

Digitate & Filiform

Finger like projections connected to the skin by single pedicle.

Planter wart.

As thick, endophytic papules on the palms, soles, and lateral aspects of the hands and feet, at the surface of skin or slightly depressed.

Treatment

- ❑ Cryotherapy (tissue freezing with liquid nitrogen).
- ❑ Curettage and cautery .

Chemical destruction with topical preparations containing salicylic acid, lactic acid, podophyllin or glutaraldehyde. Popular preparations contain high concentration .

➤ Subungual & Periungual

➤ Genital

➤ Bowenoid Papuloses

➤ Candylomata accuminata .



Common wart



Plane wart



Filiform wart



Planter wart

Molluscum cantagiosum

- Caused by a virus of the pox virus group.
- It is transmitted by skin-to-skin contact.
- The typical molluscum lesion is a pink-coloured or skin-coloured, umbilicated papule containing a greyish central plug .
- The face and genital regions are commonly involved.

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- Pox-type virus that mostly affects sheep but also cattle.
- The lesions are solitary, acute, inflammatory and blistering and are mostly on the fingers .

Following the attack, a surprisingly high proportion of patients develop erythema multiforme



MOLLUSCUM.



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