INTRODUCTION

Warts are benign epithelial neoplasms affecting the epithelium of the skin and mucous membranes. Warts are a common dermatologic condition with an estimated incidence of 10% in children and young adults (Yazdanfar et al., 2008). They are the cutaneous manifestations of human papillomavirus (HPV) (Bacelieri and Johnson, 2005). Over 100 HPV types are recognized, with affinity for different sites of the body. The clinical appearance of warts is variable and depends to some extent on the type of HPV involved and the site of infection (James et al., 2006). Diagnosis of warts is usually based on clinical examination (Sterling, 2004).

Many treatments have been described for viral warts. Common therapeutic approaches include liquid nitrogen cryosurgery, topically applied acids, chemical and thermal cautery, virucidal agents, cantharidin application, photodynamic therapy, electrosurgery, intralesional bleomycin, and carbon dioxide laser ablation (Gibbs et al., 2002). There is no treatment, which is 100% effective for warts and different types of treatment may be combined (Dhar et al., 2009).

Numerous reports have been published on the use of intralesional bleomycin for the treatment of warts, with cure rates ranging from 14% to 99% (Dhar et al., 2009). Five-Fluorouracil (5-FU) is an antimetabolite that has been used topically for the treatment of common warts (Yazdanfar et al., 2008).