SUMMARY AND CONCLUSION

This research contains 90 patients with common warts of different size, duration, number of warts and sites of varying age, sex and occupation. Patients were chosen from dermatology outpatient clinics of Benha and Mansura University hospitals. All patients were subjected to: history taking and clinical examination. Then the 90 patients were divided into 3 equally groups, each group treated by one method of treatment i.e. cryotherapy group, chemical group and electrical group. Most cases of both sexes were in age group of 10-19 years followed by 20-29 years. Sex ratio was 1.09: 1 male to female. Family history was positive in 14.4% of cases. **Cryotherapy** group contains 30 patients of common warts, all complete the research. The cryogen was liquid nitrogen sprayed from nitrospray instrument. Spray of warts and the surrounding healthy skin about 1-2mm is done. The technique used reduces blistering to a minimum. Weekly sittings were done. Topical antibiotic is used by the patients between sittings. If a blister formed and becomes tense and painfull patient advised to clean the area with antiseptic solution and puncture the blister to relieve the pressure. The wart diameter in cryotherapy group was not of the same size, about 16 patients were < 5 mm diameter, 12 of them not previously treated and 4 previously treated (3 by electrical and one by surgical removal) the cure rate was 75% (12 cured and 4 failed patients). The rest (14) were previously treated before by chemical
paint of different kinds and the warts sizes were 5-7 mm and they refuse chemical paint again, we treat them by cryo and their cure rate was 71% (10 patient cured and 4 failed). Totally number of cured cases equal 22 patients and failed equal 8 patients. So cure rate was 73.3%, the only complication was hypopigmentation in 2 patients and equal about 6.6%.

Chemical group contains 30 patients, of common warts 28 patients of them complete the study and 2 patient were defaulted. Patients use salicylic acid 16.7%, lactic acid 16.7% in flexible collodion as daily paint. Patients advised to soak the warts in warm water and rub away the warts surface by a pumice stone, then dry the warts and the surrounding skin, then apply vasiline around the warts, then apply a drop of the chemical paint by a pointed match stick on the surface of each wart and allow it to dry. If the wart is large we advise the patient to apply another drop of paint to cover the all surface of the wart. Patient advised to come every 3 weeks for examination regularly and advised to stop treatment and come at any time when he feels severe pain. Patients know that treatment may extends up to 3 months.

The wart diameter in chemical group was not of the same size, about 11 patients of wart diameter < 5 mm, 10 patients of wart diameter 5-7 mm, 5 patients of wart diameter 7-10 mm and 4 patients of wart diameter more than 10 mm. From the 30 patients 28
SUMMARY AND CONCLUSION

complete the study and 2 patients were defaulted (one patient of diameter < 5mm and the other patient of wart diameter more than 10 mm). From the 28 patients 18 cure and 10 failed. The cure rate was 64.3%. The complication of chemical paint was scarring in 5 patients and equal 17.9%.

Electrical group:

This group contain 30 patients of common warts of different age, sex, site, occupation but of the same size of wart diameter less than 5 millimeter, 29 of them complete the study and one defaulted. We use electrical cautery of low current type in combination with gentle curettage to avoid thermal damage and subsequent scarring. Patient was injected local anaesthesia subcutaneous and wart was cautarized and gentle curettage was done, then local antiseptic is applied. Patient advised to use topical antibiotic ointment and care of the wound and advised follow up weekly to avoid infection till cure of the wound. From the 29 patients 19 cured and 10 failed. The cure rate was 65.5%. The complication of electocautery was scarring in 4 patients and equal about 13.8%.

From the present study:

The highest cure rate is cryotherapy group. The lowest complication is also cryotherapy then electocautery follow the cryo in cure rate and complication and the last is chemical paint.
Cryotherapy is a good method for treatment of common warts because of less complications and failure rates in comparison with chemical cautery which needs long time and Egyptian people like short period of treatment. Cryotherapy also is better than electrocautery in treating common warts because of less complication and failure rates than electrocautery.