# Persistent Patchesght®

Stanley J. Wine, Mp, FRCPCIE OF Commercial Distribution

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## **Meet George**

- This 70-year-old man presents with an evolving, asymptomatic eruption on his lower legs that has been present for three years
- He is on medication for diabetes and high blood pressure



#### What is your diagnosis?

a) Drug eruptionb) Benign purpura

- c) Kaposi's sarcoma
- d) Diabetic dermopathy
- e) Mycosis fungoides

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#### Here is the answer to last month's case

#### **Meet Harriet**

- Harriet is a 36-year-old, Caucasian female with numerous papules on the dorsum of her hands of about one-year duration. They have been increasing in number over time
- They are generally asymptomatic, though they are occasionally itchy
- A mild topical steroid was prescribed, which did not seem to improve the lesions
- She is otherwise healthy, takes no medications, and has no family history of skin problems



# What is your diagnosis?

- a) Gottron's papules of dermatomyositis
- b) Common warts
- c) Psoriasis

- d) Knuckle pads
- e) Dyshidrotic eczema

#### **Answer: B**

This is a case of common warts (answer b). There are now over 120 strains of the human papillomavirus that cause warts. Although infectious and, therefore, contagious, warts often affect just one part of the body without spreading to other areas. Different types of warts include plantar warts (bottom of foot), flat or plane warts (face, legs), periungual warts (around or under a nail), filiform warts (single long stalk), and genital warts. Specific, "high risk" types of HPV that cause genital warts are associated with anal, penile, cervical, and vulvar cancers. Periungual, mosaic, and flat warts are particularly stubborn lesions to treat.

Benign neglect is a popular treatment option, since many warts will simply resolve on their own with time. Over the counter salicylic acid preparations of various concentrations (typically 17 to 40%) can be tried, as can "suffocating" warts with duct tape, which is of questionable benefit. Physicians will typically perform liquid

nitrogen cryotherapy and/or prescribe a mix of acid compounds or immunomodulators, such as imiquimod or 5-fluorouracil. Topical cantharone can also be tried in some cases, as can electrosurgery, bleomycin injections or tattooing, and excision.

Benjamin Barankin, MD, FRCPC

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#### **Congratulations**

to our winner for the month of June 2013

**Dr. Sam Naghibi** Newmarket, Ontario