

The logo features a purple background with a white graphic of several overlapping circles on the left. To the right, the text 'West of Scotland Sexual Health Managed Clinical Network' is written in white and yellow. Below this, five NHS logos are displayed, each with a blue wave-like graphic underneath. The NHS logos are for: Ayrshire & Arran, Dumfries & Galloway, Forth Valley, Greater Glasgow and Clyde, and Lanarkshire.

West of Scotland Sexual Health Managed Clinical Network



TREATMENT FOR GENITAL WARTS

There are several options for managing genital warts:

1. Let them get better by themselves. One in 3 people will find the warts go away by themselves within 6 months.

2. Podophyllotoxin also known as warticon or condyline. These come as a liquid or a cream. You use this at home.

You apply it to the warts twice a day, morning and night for 3 days, then you have 4 days off (for example use it morning and evening Monday, Tuesday and Wednesday, then don't use it on Thursday, Friday, Saturday and Sunday. Repeat this weekly pattern starting again on the Monday).

When applying, avoid the normal skin and let the cream/liquid dry before getting dressed.

Do not use this treatment in pregnancy or if breastfeeding. If your partner is pregnant ensure this treatment has been washed off completely before having unprotected sex.

3. Imiquimod/Aldara®- this is a cream that you use at home. It comes in small sachets. You apply the cream from one sachet at night to the warts and wash it off in the morning. Avoid the normal skin. Apply three times a

week only e.g.: Monday, Wednesday and Friday. Repeat this cycle for as long as is directed by your nurse/doctor. Do not use this treatment in pregnancy or if breastfeeding. If your partner is pregnant ensure this treatment has been washed off completely before having unprotected sex.

4. Cryotherapy/ liquid nitrogen - sometimes known as freezing. This is usually carried out in the clinic setting. Each wart is frozen for a few seconds. Freezing is usually done weekly. You may need more than one treatment – most people need to come for several treatments – depending on the size and number of the warts and your body's response to treatment.

This is the treatment used in pregnancy.

5. Surgery - in some cases where the warts are of a certain size or position the doctor may recommend referring you for surgery to get them removed.

General Advice

Latex condoms may be weakened if they are in contact with podophyllotoxin or imiquimod.

If you use either podophyllotoxin or imiquimod then you should avoid sexual contact for a few hours as it may cause skin irritation on your partner.

Do not use wart removal preparations that you can buy from the pharmacy as they are not designed for the genital area and may damage the genital skin.

Smokers may respond less well to treatment than non-smokers so please seek help from smokeline.

What should I do after treatment?

While you are having treatment the treated areas may become slightly red and irritated. Wash the area at least daily with salt water solution or wash in a salt water bath. Avoid soap if the skin is broken. If the area is really sore and swollen ask for a review at the department where you were treated.

The treatment options described above are not cures. Once the warts are gone they may come back. If you do find they have returned and you would like them treated please re-attend your GP or sexual health.

If you have any concerns or require more information please contact:

Appointment line 0345 702 3687

Helpline 07736 955 219 (Mon–Fri 1pm to 2pm)

Email: dgsexualhealth@nhs.net

Facebook message: Sexual Health D&G

www.sexualhealthdg.co.uk