

Case Study: Plantar Warts in a Callus

By **Steven Leon MS, PA-C**

An 80-year-old female presented with a chief complaint of a long-standing callus which had recently thickened and was now causing discomfort, especially while walking. Examination revealed three warts in the callus. Due to the patient's advanced age, fall risk, and her wish to continue her normal activities, **wartPEEL®** (2% 5-FU/17% Salicylic Acid) Remedium™ Adhesive Gel was the treatment of choice.

The patient was successfully treated with 10 days of nightly application of wartPEEL. Curettage was performed after the 7th application and the patient was advised to continue for 3 more days. The patient reported no disruption of her normal routine during treatment. Mild stinging and discomfort were reported in the last two days of treatment. Three months later, no recurrence was noted.



Before



7 days of Treatment after Curettage



3 Weeks Later: Complete Clearance

WartPEEL is considered a first line treatment for periungual, plantar, palmar and common warts by podiatrists, dermatologists, and PCP's across the nation.

WartPEEL was developed by NuCara pharmacists in collaboration with podiatrists and has been available since 2004. Its unique water based Remedium Adhesive Gel is central to wartPEEL's three US patents. It is considered a first line treatment for periungual, plantar, palmar and common warts by podiatrists, dermatologists, and PCP's across the nation. WartPEEL is available in 49 States only from NuCara Pharmacy.

Formulation Highlights:

- Compounded medicine for at-home nightly treatment. 3M Blenderm tape is included to apply after wartPEEL has dried.
- Short treatment times: Average 1-3 weeks with proper use and follow up.
- Follow up: Recommended in 3-4 weeks. Curettage may be performed then.
- Excellent tolerability: Dries and does not migrate to

perilesional skin. Most patients can continue normal activities, even sports.

- **Proprietary Remedium Adhesive Gel:** A unique water based adhesive gel vehicle designed to penetrate hyperkeratosis. WartPEEL is applied as a gel and after 15 minutes of drying, changes into a sustained release patch which adheres to the wart. This is much different than creams or ointments which spread off the wart onto perilesional skin, even when tape is applied.

- **No incidence of scarring to date:** WartPEEL appears not to irritate the dermis but not to damage it. be strong enough to damage the dermis.

Key Mechanisms of Action:

- **Penetrate and hydrate the compact corneum:** Unique water based vehicle leverages the properties of the best skin penetrating agent, water which works synergistically with salicylic acid, and DMSO. 3m Blenderm tape reduces transepidermal water loss.

- **Consistent delivery of 5-FU to the level of wart replication is believed to be key to wartPEEL's high efficacy and low recurrence rate.**

What to expect?: The wart will turn white in the first few days. At home debridement with a nail file can be recommended. Patients will experience some pain and stinging towards the end of treatment as the wart is destroyed and wartPEEL begins to irritate the dermis beneath the wart.

Conclusion: WartPEEL adhesive gel has an observed cure rate of 95% (for all warts) with proper use and follow up. Its excellent tolerability and short treatment time have made it a vital first line treatment for podiatrists nationwide. More treatment failures are seen in thick, longstanding palmar and plantar warts in adults. However even those patients have a substantial reduction in wart size and symptoms. *Call wartPEEL at 818-391-9592, visit wartpeel.com, or click here.*

Steven Leon MS, PA-C is a clinical consultant for WartPEEL. He has published 7 articles on wart and wartPEEL treatment, and is available for training and consultation.