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## Clinical Efficacy of Potassium Hydroxide 10% for the Treatment of Common Warts

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### ABSTRACT

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**Background and Aim:** Common wart is considered one of the common diseases that are caused by the human papillomavirus; despite the high tendency for spontaneous recovery, it needs treatment. Topical application of keratolytic agent on virus-infected cells is one of the standards in the treatment, potassium hydroxide [KOH] is a strong, less irritating keratolytic agent, less painful, and can be safely used in all age groups. This study is aimed to evaluate topical 10% KOH in the treatment of common warts as regards safety and efficacy.

**Patients and methods:** This open therapeutic trial study was performed on 70 patients with a total of 168 common warts, who were treated with topical 10% KOH solution once at night for twelve weeks. The patients were evaluated at the end of the study to record the percentage of improvement and adverse effects and follow up for 3 months to detect any recurrence for those patients who showed complete cure.

**Results:** At the end of the study about 70 % of patients showed complete recovery of their warts. Moreover, we didn't observe any serious adverse effects, however, Hyperpigmentation was presented in 31.4% of patients, with no significant difference as regard location of warts.

**Conclusion:** Topical KOH 10 % solutions are promising, effective, safe, and well-tolerated treatments for common warts.

Keywords: Human papillomavirus, Keratolytic, KOH.



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### **INTRODUCTION**

Common warts are the commonest type of benign epidermal proliferation of the skin caused by human papillomavirus, transmitted mainly by direct skin-to-skin contact <sup>[1, 2]</sup>. Despite warts usually, having self-limiting and spontaneous resolution taking place within months to years, there are chances of spreading to other sites and other persons; so local destruction using, electrocoagulation, cryotherapy, laser therapy, or topical keratolytic is a commonly employed treatment modality performed <sup>[3, 4]</sup>. Potassium hydroxide [KOH] is an effective, well tolerated, and safe keratolytic agent in the treatment of different cutaneous dermatoviruses, including warts and molluscum contagiosum as it can penetrate deeply the skin by dissolving keratin due to its highly alkaline nature [5-7].

### **PATIENTS AND METHODS**

An open prospective therapeutic study design was set and approved by the local ethics committee of the faculty of Medicine, Al-Azhar University; from October 2020 to January 2022. Formal consent was taken from seventy patients of both sexes; their age range was 5-45 years with multiple cutaneous common warts [total number 168] before their inclusion in this study; patients currently using any treatment for warts neither topical for 1 month nor systemic for 3 months before the study, pregnant and lactating women, patients with hypersensitivity to the alkaline agent [KOH], patient with immunesuppression, comorbid conditions or diabetes and those unable to return for follow-up were excluded from the study. The diagnosis of common warts was made clinically; the site and number of warts were recorded on inclusion. A solution of 10% w/v KOH was prepared by dissolving 100 g of KOH in one-liter distilled water. The patients were instructed to use 10% KOH solution topically once to the wart under Vaseline cover of surrounding skin using a cotton-tipped toothpick dipped in the solution, keeping it perpendicular to the skin surface. The therapy was continued until all the lesions cleared or till the completion of 12 weeks, whichever was earlier. Photographs were taken before therapy and then at the end of 12 weeks to evaluate the response to treatment and record any adverse effects. Patients were considered a responder when there was complete disappearance of warts; however, if there was no change, the patients were considered nonresponse; if there is a decrease in the number of warts, the patients were considered partial responders; and the total number of warts was calculated before and at the end of the study.

### **Statistical Analysis**

Statistical Package for Social Sciences [SPSS] version 23.0 program for Windows was used for data processing. Continuous variables were presented as mean  $\pm$  standard deviation [SD] and had been compared using the student's Test. Categorical factors were presented as frequencies and percentages and had been compared using Person's Chi-square test. P-value < 0.05 was considered significant.

### RESULTS

Of a total seventy patients with 168 common warts were enrolled in this study. 18 patients [25.7%] were males and 52 patients [74.3%] were females. The age of the patients ranged from 5 to 45 years with a mean age of  $27.01 \pm 10.1$  years, with a mean number of warts  $[2.4 \pm 1.04]$  and ranging from 1 to 6. The duration of the lesions ranged from 2 months to 10 months with a mean duration of  $4.9 \pm 1.9$ months. As regards the degree of response it was complete clearance of the common wart in 38 patients [54.3 %] [Figure 1], Partial response occurred in 22 patients [31.4%]; there was no change in ten patients [14.3%]. With no statistically significant difference between these groups as regards characteristics values [p value > .005]. It was found that there is no significant difference in wart clearance as regards wart location [Table 1].

The number of lesions in our studied patients significantly decreased after KOH 10 % solution application from [168 to 46] with a mean [2.4  $\pm$  1.04 to 0.66  $\pm$  0.8] with a mean percentage of improvement [69.7  $\pm$  39.05] p value < 0.05 [Table 2].

Regards adverse effects, post inflammatory hyperpigmentation was observed in 22 patients with significant differences as regard sites of warts [Table 3].

		Response [n=38; 54.3%]	Partial response [n=22; 31.4%]	No response [n=10; 14.3%]	P value
Age*	Mean ± SD Range [5-45]	$28.68\pm8.9$	$22.8\pm9.9$	29. 8 ± 12.8	0.06
Number*	Mean $\pm$ SD	$2.32\pm0.8$	$3.05 \pm 1$	$1.3 \pm 0.41$	0.1
<b>Duration wart*</b>	Mean $\pm$ SD	$4.84 \pm 2$	$4.91 \pm 1.7$	$5.10 \pm 2.1$	0.7
Sex**	Male	9 [23.7 %]	5 [22.7 %]	4 [40 %]	0.5
	Female	29 [76.3 %]	17 [77.3 %]	6 [60 %]	
Family history**	Positive [16]	8 [21.1 %]	5 [22.7 %]	3 [30 %]	0.8
	Negative [54]	30 [78.9 %]	17 [77.3 %]	7 [70 %]	0.0
Post inflammatory	Present [22]	14 [36.8%]	6 [27.3 %]	2 [20 %]	0.5
hyperpigmentation**	Absence [48]	24 [63.2%]	16 [72.7%]	8 [80 %]	0.5
Site of common	Dorsum of hand [34]	20 [52.6 %]	11 [50 %]	3 [30 %]	
wart**	Sole [31]	16 [42.1 %]	9 [40.9 %]	6 [60 %]	0.6
	Face [5]	2 [5.3 %]	2 [9.1 %]	1 [10 %]	

### Table [1]: Patients characteristics values

 Table [2]: Therapeutic response in the studied group

Common wart	Before	After	P value
Number of warts	168	46	
Mean ±SD	$2.4{\pm}1.04$	$0.66 \pm 0.8$	< 0.001*
Mean percentage of improvement	$69.7\pm39.05$		

### Table [3]: Post Inflammatory Hyperpigmentation as regard site

Site	Present [n=22; 31.4%]	Absent [n=48; 68.6%]	P value
Dorsum of hand [34]	17	17	
Sole [31]	5	26	0.004*
Face [5]	0	5	



Figure [1]: Single wart before and after application of KOH 10%

### DISCUSSION

Destruction of the infected cells is the most common approach for the treatment of common warts. However, studies done on caustic agents for common warts are scarce. There are insufficient informative data to show the safety and efficacy of a safer, easy to use, and alkaline inexpensive agent for topical destructive [8]. Potassium hydroxide in varying concentrations is routinely used by dermatologists to identify fungal elements; also it is known to penetrate deeply and destroy the skin because it breaks down keratin <sup>[9]</sup>. This study has evaluated the efficacy and safety of well-known alkaline agents at a concentration of 10 %. It was seen that the mean rate decrease in the wart number at the end of the study was 69.7  $\pm$  39.05 demonstrating that 10% KOH has a propensity of clearing warts These outcomes are coordinated with Jayaprasad<sup>[8]</sup> in his singlecenter, open comparative randomized uncontrolled therapeutic trial on 30 patients with plane warts treated with 10 % KOH showed early clearance of warts compared to 30% TCA. We postulated that the mechanisms of warts clearance after KOH solution application are shown to be related to its keratolytic effect that leads to the destruction of virus-infected cells and also probably attributed to informatory reactions <sup>[10]</sup>. We reported tolerable adverse effects of 10% KOH application such as burning sensation, erythema, severe stinging, and erosion which are transient and disappear spontaneously except for post-inflammatory hyperpigmentation in 31.4% of the patient more observed in the dorsum of the hand compared with other sites [Table 3] as its keratolytic effect within the skin varying according to the body [9] region and individual susceptibility Pigmentary disturbance could be attributed to the concentration of KOH [10%] but in a study conducted by **Romiti** et al. pigmentary disturbances were not seen with 5% KOH applications. They concluded that 5% KOH proved to be as effective and less irritating when compared to 10% KOH [5]. However, in his study, the selected group was children treated for 6 months also, the differences in the duration of both studies as common warts need more time [12 weeks in our study] to dissolve keratin due to the hyperkeratotic nature of common warts. We concluded from this study that the application of 10% KOH solution once daily is effective for common wart clearance with tolerable adverse effects.

# **Conflict of interest and financial disclosure:** None

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