



Education

Genital Warts

What are genital warts?

Genital warts are similar to common warts but are found around or in the penis, anus, vagina, or cervix. They are single or multiple soft, fleshy, small growths on the skin.

How do they occur?

Like other warts, genital warts are caused by a virus. The name of the virus that causes genital warts is human papillomavirus (HPV). There are many types of HPV. The types of virus that most often cause genital warts are called HPV-6 and HPV-11.

Genital warts are more contagious, or more easily spread, than other warts. They are spread by skin-to-skin contact. They may spread to other nearby parts of the body and they may be passed from person to person by sexual activity. The warts are usually first seen 1 to 6 months after you have been infected with HPV. However, you can be infected with HPV without having any visible warts.

What are the symptoms?

Genital warts are small, flesh-colored, grayish white or pinkish white growths. They usually appear as thin, flexible, solid bumps on the skin that look like small pieces of cauliflower. Some warts, however, are small and flat and may not be easily noticed.

In women, warts can grow in the area of the vulva (the folds of skin around the opening of the vagina), on the cervix, inside the vagina or urethra, or around the anus. In men, warts can grow on the tip or shaft of the penis and sometimes on the scrotum, in the urethra (the tube that carries urine out of the body), or around the anus.

Sometimes the warts may disappear on their own without treatment. They are more likely, however, to grow and form larger cauliflowerlike clusters of warts. You may have no symptoms, or you may have occasional mild irritation, burning, itching, tenderness, foul smell, pain with intercourse, increased vaginal discharge, or bleeding.

When genital warts are on the cervix or in the vagina, they may not cause any noticeable symptoms. However, a Pap test may show changes in the cells that suggest a viral infection.

How are they diagnosed?

Your health care provider will examine your skin and the wart. Your provider may put a liquid on the skin to make it easier to see the wart. An instrument called a colposcope will magnify the area so your provider can look more closely at the skin or the cervix. A sample of tissue may be taken for lab tests to help confirm the diagnosis. A scope may be used to check for warts in the bladder and the urethra.

Often warts that cannot be seen are diagnosed when women have a Pap test.

Because HPV is often passed from one person to another during sexual activity, you may have tests for other sexually transmitted diseases (STDs).

How are they treated?

The main methods of treatment are:

- putting medicine on the warts
 - surgically removing the warts
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- freezing the warts with liquid nitrogen (cryotherapy)
- destroying the warts with a laser
- burning off the warts using a wire loop and electric current (electrocautery).

You may need a local anesthetic to numb the area before some of these treatments.

Both sexual partners need treatment if they have genital warts. Treating just one partner is not very effective because the other partner will reinfect the treated partner.

Removal of the warts does not get rid of the virus. Because you will still have the virus after treatment, the warts could come back. Genital warts that persist or come back after standard treatment may be treated with interferon shots. Interferon is a medicine that boosts the body's immune response and helps keep viruses from multiplying.

If you have genital warts and plan to get pregnant, get treatment for the warts before you get pregnant. If you get genital warts while you are pregnant, it is rare for the HPV to affect the baby. However, warts tend to grow and you may get more of them during the pregnancy. Usually the warts are not treated until after you deliver your baby. A cesarean delivery (C-section) will not have to be done to prevent spread to the baby. You may need to have a C-section, however, if your health care provider thinks the warts are so big and many that a vaginal delivery may cause too much bleeding.

How long will the effects last?

Genital warts can be successfully treated and removed. However, in some people the warts may reappear weeks or months later. If the warts come back, they need to be treated or removed again.

Certain types of HPV infection of the cervix can lead, in time, to cervical cancer in women. The HPV-6 and HPV-11 types of virus, which are the usual cause of genital warts, rarely lead to cancer and are called low-risk HPVs. High-risk types of HPVs cause growths that are usually flat and nearly invisible, as compared with the warts caused by types HPV-6 and HPV-11.

How can I help take care of myself?

- If you have genital warts and plan to get pregnant, have your warts treated first.
- Keep the genital area clean and dry. You can use a hair dryer to help dry the area.
- Wash your hands thoroughly after touching the area with warts.
- Don't scratch the warts.
- Avoid sexual contact until you have finished your treatment and the warts are completely healed.
- Get follow-up exams according to your health care provider's recommendations.
- Have a Pap test as often as your health care provider recommends.

How can I help prevent the spread of genital warts?

Not having any sexual contact is the best way to prevent the spread of HPV.

Researchers have developed a vaccine called Gardasil to prevent types of HPV infections that are high risk for cancer of the cervix and warts. The vaccine has recently been approved for use by the FDA. If you already have HPV, it will not cure your infection, but it will prevent infections with several other types of HPV.

The Gardasil shot is recommended for girls and women 9 to 26 years old. It is given in 3 doses within a period of 6 months. Gardasil can protect you from HPV for 5 years. Researchers are doing studies to see if a booster shot after 5 years is needed.

Gardasil is usually not given to pregnant women.

Here are some other things you can do to help prevent HPV or its complications:

- Do not have sexual intercourse until you are married or over the age of 18.
 - Use latex or polyurethane condoms during sex. Even after your warts are gone, you can infect your partner because the virus is still in your body. Condoms can reduce the risk of getting genital warts from another person, but HPV can spread from areas not covered by a condom.
 - Have just one sexual partner who is not sexually active with anyone else.
 - Avoid sexual contact until the genital warts or HPV is completely treated and healed.
 - Avoid smoking. Studies show that smoking increases the risks and problems related to HPV infection.
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