
The Effectiveness & Safety of Topical Podophyllin Therapy in Condylomata Acuminata in Iraqi Infants and Young Children.

Khalifa E. Sharquie
MD, PhD.

Makram M. Al-Waiz
DDSc, PhD

Adil A. Al-Nuaimy
DDV, FICMS

Abstract

Background: Condylomata acuminata an infection caused by Human papilloma virus. The incidence of anogenital warts among children is rising. Still anogenital warts can be the only manifestation of child sexual abuse. Human papilloma virus typing dose not provide definitive evidence for or against sexual abuse.

Objective: To evaluate this condition among Iraqi children and to report the experience with podophyllin.

Method: Condylomata acuminata was studied in eighteen infants and young children, attending the Department of Dermatology & Venereology- Baghdad Teaching Hospital in Period from January 1996 to January 2000.

Results: The ages of patients ranged from 6 – 84 months (mean \pm SD 23.66 ± 20.30 months), 11 females and 7 males. The duration of the disease ranged from 3 – 8 months (5.83 ± 1.24 months).

The clinical pictures were mostly a cauliflower like warts affecting the genital area, anal and perianal areas. Sexual abuse was not confirmed in any case. Family history of genital warts was denied among all family members apart from one girl that her mother had verruca vulgaris on their fingers.

Fifteen percent Podophyllin in tincture benzoin was an effective therapy and all lesions had disappeared after 1 – 3 applications (1.77 ± 0.73 months) once weekly with no sign of relapse through several months of follow up.

Conclusion: The present work is compatible with the increase in the frequency of genital warts among infants and young children all over the world. Since there was no history of sexual abuse in affected patients, we believe that genital warts result from direct contact with other members of the family, who are either not aware of the presence of warts or they have latent infection.

Podophyllin seems to be the drug of choice for all patients who responded quickly to this mode of therapy. This experience with podophyllin in this age group has not been reported in the published literatures.

Key Words: Condylomata acuminata, infants & young children, Podophyllin

Introduction

Condylomata acuminata an infection caused by human papilloma virus, has become one of the most common sexually transmitted disease in adults^[1-5].

The incidence of anogenital warts among children is rising^[1, 6-9]. Yet the relationship to child abuse remains controversial while many cases of anogenital warts in children probably represent autoinoculation, vertical transmission or non sexual transmission^[3, 6, 7, 8, 10-19]. Still Anogenital warts can be the only manifestation of child sexual abuse^[6, 17-19]. Human papilloma virus typing dose not provide definite evidence for or against sexual abuse^[8, 15, 17, 18].

Prospective surveys have documented perinatal transmission of human papilloma virus at oropharyngeal and genital sites in as many as half of infants delivered vaginally^[10, 11, and 19]. Reports of subclinical infection of neonates delivered by cesarean section and of congenital condylomata strongly support the possibility of ascending infection^[10, 21]. The potentially long incubation period of the human papilloma virus also confounds picture^[6, 7, 17, and 18]. Some investigators believe that the appearance of warts before the age of 2 years is suggestive of perinatal transmission^[7, 17], and appearance either at birth or within the first week of life, is diagnostic of perinatal transmission^[7, 19].

The existence of multiple treatment modalities reflects the fact that none is uniformly effective or

direct antiviral^[1, 3, 5, 19, and 22]. Several treatment options are available for condylomata acuminata in adults, non have been studied for treatment of children^[1]. Most of the treatment mentioned are painful and traumatic for children, some even requiring general anesthesia with its associated risk^[1, 5]. Whatever method is used there will be failure and recurrences^[3, 17].

The present work was conducted to evaluate this condition among Iraqi children and to report the experience with podophyllin as a safe, effective, mode of therapy.

Patients & Methods

Condylomata acuminata was assessed in 18 patients attending the Department of Dermatology & Venereology in Baghdad Teaching Hospital in period from January 1996 to January 2000.

A full history was taken from their parents regarding the presence of obvious genital warts, behavioral abnormalities, the mother or household contact but they were not examined and sexual abuse was carefully searched for.

Examination of the affected patients was conducted. Also careful searching for signs of sexual abuse was carried as follow:- fresh and old bruise location, unusual scars or burns or wounds, funnel shaped anal area, signs of rectal or genital infection or injury.

Treatment with podophyllin in tincture benzoin (15%) was applied once weekly and the follow up was carried out for several months.

Results

Eighteen patients with condylomata acuminata were evaluated. Their ages ranged from 6-84 months (mean \pm SD 23.66 \pm 20.30 months) while the duration of the disease ranged from 3-8 months (5.83 \pm 1.24 months). Girls (11) were mostly affected compared to seven boys with a female:male ratio nearly 1.6:1 (Table.1). The examination revealed typical cauliflower condylomata acuminata in the genital in two (11.1%) patients, in anal and perianal were 13 (72.3%) patients while in

both areas were three (16.6%) patients (Table-2) except one girl had skin colored papular form of condylomata acuminata in natal cleft & perianal area. All parents and other members of families patient's denied having genital warts apart of one girl who her mother had verruca vulgaris on their fingers. Sexual abuse could not be ascertained in any patient.

The result of treatment with 15% podophyllin in tincture benzoin was effective after 1-3 applications (1.77 \pm 0.73 months) once weekly. All genital warts had disappeared during follow up for several months, there is no signs of relapse.

Table.1: The range, mean \pm SD, age, duration & No. of application of treatment to patients with condylomata acuminata.

Infant & children treated	Range	Mean	SD
Age (In Months)	6 – 84	23.66	20.33
Duration (In Months)	3 – 8	5.83	1.24
No. of Application (Once weekly)	1 – 3	1.77	0.73

Recurrence rate was zero within 6 months..

Table.2: The frequency distribution of patient sexes by their site of condylomata acuminata.

Girls		
Location	No.	%
Anal	6	54.54
Genital	2	18.18
Both	3	27.27
Boys		
Anal	7	100
Genital	0	0
Both	0	0

Girls to boys ratio = 1.6 – 1.

Discussion

The incidence of the genital and perianal warts in infants and children is increasing all over world [1,2,6-9]. This can not explain but this probably

reflects increase in prevalence of genital warts in general population [1,2,5,17,18,19,23].

The present work had compatible with this increase in the frequency of genital warts among infants and

young children^[1,2,6-9]. Since there was no history of sexual abuse in affected patients, so we believe that genital warts result from direct contact with other members of the family, who are either not aware of the presence of warts or they have latent infection

Podophyllin seems to be the drug of choice for all patients who responded quickly to this mode of therapy. This experience with podophyllin in this age group has not been reported in the published literatures before.

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Department of Dermatology & Venereology, College of Medicine, University of Baghdad.