



MAIDENHEAD
PODIATRY

VERRUCA & DRY NEEDLING

Treatment Information

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What is a verruca, how they form and how dry needling works

If you have a verruca it is most likely that you will have caught it from a communal floor such as a swimming pool or changing room but it could just as easily have been at home or on holiday.

The virus that forms a verruca is called the Human Papilloma Virus (HPV) and it can survive for some time outside the body. It can resist desiccation, freezing, and prolonged storage outside of host cells. To become active it needs a host cell to infect and it finds this in the upper layers of the skin known as the epidermis, often entering through cuts or abrasions.

When the virus has infected the host cell, it alters the genome. When it reproduces, it produces two cells with the altered genome; those two produce four, eight, sixteen and so on until there are a sufficient number of altered cells for a verruca to become visible to the naked eye.

The only way that a verruca can be successfully treated is if every infected cell is destroyed, and the only way that can be done is through an antibody response. For the same reason we cannot cure the common cold and 'flu', we cannot cure verrucae; but the immune system can, given the chance. That is where dry needling is so useful.

As the virus is confined to the epidermis there is no systemic dissemination and it is thought for the same reason the immune system cannot see it. The way dry needling works is to push verruca cells from the epidermis through into the dermis and hypodermis or adipose layer thereby inoculating the underlying tissue.

This triggers an immune response, the appropriate antibodies are produced and over the subsequent weeks the verruca undergoes a natural deterioration before ultimately disappearing.

The Procedure

Dry needling is performed under local anaesthetic with three or four injections around the ankle to ensure the foot is completely numb before proceeding.

Having established that the area to be treated has been completely anaesthetised a hypodermic needle is used to repeatedly puncture the verruca. This pushes verruca tissue from the epidermis through into the dermis and underlying adipose tissue layer.

Once this process has been completed a simple dry dressing is applied. This must be kept dry for at least twenty four hours.

The anaesthetic will start to wear off in two to three hours, but do not be concerned if it takes a little longer as the effects vary from person to person.

After forty eight hours showering is permitted and life can continue as normal. There may be some slight discomfort for the first couple of days and pain relief may be taken to ease this as long as it is not aspirin based.

The site of the procedure will be checked by your podiatrist after two weeks to check healing and remove scabbing and again after eight weeks to measure the degree of regression of the verrucae.

Important information for the day of the dry needling

- You are allowed to eat before dry needling
- The dressing applied following dry needling is not bulky and so no particular type of shoe need be worn.
- Make arrangements for **getting a lift home with someone**, as you will not be covered by your car insurance to drive for 12 hours
- Please inform the Podiatrist on the day of dry needling of any changes in medication or changes in your health. Please bring the names of any new medicines with you
- You will be expected to change the dressing a couple of times in the first week. Sterile dressings will be provided by the clinic
- You should not require any time off work

Initial aftercare

The following guidelines are recommended to help you have a quick and pain free recovery after dry needling:

- **Avoid driving for 12 hours**
- **Alcohol should be avoided for 24 hours**
- Keep the dressing dry for 48 hours
- For the first couple of days keep walking to a minimum and avoid running altogether
- It is advisable when you get home to rest with your feet elevated for the first 2 hours - this helps the blood to clot and promotes healing
- Painkillers may be necessary initially as the anaesthetic wears off. Avoid Aspirin-based products.

There may be some initial bleeding through the dressing. This is not uncommon. Do not be alarmed - put an extra dressing on top and do not disturb the original dressing. Remember to wash your hands with soap and water before applying the dressing.

Although uncommon, infection will normally show as an increase in pain, heat and/or thick yellow discharge. If you suspect you may have an infection then contact the clinic on **01628 773588**.

You will be expected to dress the area yourself for the first week. Once healing is established it is not necessary to keep the area covered. You will be reviewed at two and eight weeks to ensure healing is taking place.

Healing times can vary, depending on the individual. A scab will form over the wound and there may be a slight discharge. Eventually the scab will come away and the size and depth of the verrucae will gradually diminish until no longer visible.

On-going Aftercare and Dressing Changes

Before you start make sure you have the following:

- About 10 minutes of uninterrupted time
- Clean bowl (big enough for your foot)
- Clean soft towel
- Two tablespoons of salt
- Sterile dressing (supplied by clinic)

What to do (one foot at a time)

- Half fill the bowl with clean lukewarm water, make sure it is not too hot – (ideally this would be boiled water left to cool but it is not essential)
- Add two tablespoon of salt and stir until dissolved
- Take off your shoe and sock
- Wash your hands thoroughly with soap and water
- Remove the adhesive tape from the old dressing and any parts that come off easily - the rest will soak off in the water if necessary
- Immerse the foot in the water for 5 - 10 minutes
- Take the foot out of the water, remove any remaining dressing and dry it, avoiding direct pressure on the area treated
- Apply the fresh sterile dry dressing.

If you have *any* concerns between appointments please contact the clinic **01628 773588**.