
Intralesional vitamin D3 in periungual warts



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THERAPEUTIC CHALLENGE

Destructive modalities used in the treatment of warts like electrocautery, cryosurgery, and ablative lasers have the potential to cause scarring and onychodystrophy when used at periungual locations. Immunotherapy offers a safe and efficacious therapeutic modality at these locations.

SOLUTION

Vitamin D3 injections are available in 600,000 IU (15 mg/mL) doses in an oily base. These injections can be given at a dose of 0.1 mL/cm² just beneath the wart (Fig 1). A maximum of 0.4 mL is used in a single session in cases of multiple warts. The session can be repeated at 2-week intervals for a maximum of 4 sessions or complete resolution of warts, whichever is earlier. Resolution of warts typically starts in 7 to 10 days, and warts are shed spontaneously within 4 to 6 weeks (Fig 2). The only side effect is pain during injection, which can be minimized with a dose of lidocaine before injection with vitamin D3. Two to 4 sessions are usually required on average for complete cure. Vitamin D3 acts on the principle of immunotherapy by stimulating cell-mediated immunity. It is a safe, inexpensive, effective management option for periungual warts.



Fig 1. Filiform wart at the thumb.

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Fig 2. Resolution of the filiform wart after injection of vitamin D₃ (0.2 mL) at day 7 (A), day 14 (B), day 21 (C), and 1 month after the second injection (D).