MEBO for Curing Common Warts after Laser Surgery

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[Abstract] Objective: To investigate the effect of MEBO in treating common warts after laser surgery.

Method: Sixty-seven cases of common warts were treated with YAG laser and then MEBO was applied to the wounds. The efficacy of MEBO was compared with that of erythromycin ointment and povidone iodine.

Result: MEBO is superior to erythromycin ointment and povidone iodine (P<0.01).

Conclusion: MEBO had good efficacy in treating pointed common warts.

[Key words] Common warts; MEBO; Erythromycin ointment; Povidone iodine;

Common wart is a kind of virus dermatopathy encountered commonly. It can produce one or many skin vegetations all over the skin. It may cause pain or disturb the life of the patients according to its location. Using the common treatment method, the wound is hard to heal or recurrence will occur. Common warts were treated with YAG laser and then MEBO (Moist Exposed Burn Ointment) was applied to the wounds to investigate the efficacy of it in this research. The curative effect was satisfactory. The details are as follows:

First: Clinical Data

There were 126 males and 59 females of the total 185 patients. The age was from 3 years old to 85 years old. Three hundred and sixty-six cases of pathological changes were included involving 48 cases at the head, 128 cases at the neck or face, 98 cases at the hand, 38 cases at the foot and 54 cases at other regions. The area of pathological change was from 0.2 cm × 0.2 cm to 3.5 cm × 3.2 cm.

Second: Method

The region with pathological change was sanitized using routine method. Local anaesthesia was realized by applying 2% lidocaine. The region with pathological change was steamed and cut using YAG laser surgery and the cutting range was 0.1 mm larger than the region with pathological change. The region with pathological change was removed thoroughly. The 185 cases were divided into 3 groups. Group I: 65 cases. The common warts were treated with YAG laser surgery and then povidone iodine was applied to the wounds 2 times a day. Group II: 53 cases. The common warts were treated with YAG laser surgery and then 1% erythromycin ointment was applied to the wounds 3 times a day. Group III: 67 cases. The common warts were treated with YAG laser surgery and then MEBO was spread using cotton sticks onto the wounds with a thickness of 0.5 mm ~ 1 mm and 3 times a day. The wound was kept moist and the liquified matter was removed timely. The wound condition, dynamic change of pains and wound areas were observed at the
moment right after the laser surgery, 3 days after the surgery, one week after the surgery and once a week after one week. The healing time was observed and recorded. 6 times of callbacks were made after healing with a frequency of once a month.

Third: Curative Effect

The healing time of the wound in group I was 10~50 days with the average healing time of 10.08±3.88 days. The healing time of the wound in group II was 8~46 days with the average healing time of 8.88±3.18 days. The healing time of the wound in group III was 6~28 days with the average healing time of 6.68±2.76 days. The statistical difference between group I and group II was not significant (t=1.81 and p>0.05). The statistical difference between group I and group III was significant (t=5.82 and p<0.01) and so is the statistical difference between group II and group III (t=4.09 and p<0.01). The aching symptom could be relieved within 10 minutes after the application of MEBO in group III. However, aching in group I and II could last for several tens of minutes. No obvious infections occurred in the three groups. The rate of one-time-healing and recurrence in the 6-month follow-up were listed in Table 1.

Table 1 Comparison of one time-healing rate in the three groups

<table>
<thead>
<tr>
<th>Group</th>
<th>Cases</th>
<th>Recovery (%)</th>
<th>Recurrence (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>65</td>
<td>46 (70.77)</td>
<td>19 (29.23)</td>
</tr>
<tr>
<td>II</td>
<td>53</td>
<td>43 (81.13)</td>
<td>10 (18.87)</td>
</tr>
<tr>
<td>III</td>
<td>67</td>
<td>66 (98.51)</td>
<td>1 (1.49)</td>
</tr>
</tbody>
</table>

According to Chi-squared test, the difference of only-one-time healing rate between group III and group I (x²=19.75 and p<0.01) and the difference between group III and group II were significant (x²=8.74 and p<0.01). However, the difference between group II and group I was not significant (x²=1.69 and p<0.05).

Fourth: Discussion

Common warts are commonly encountered skin benign neoplasm caused by human papilloma virus. It can infect mainly through direct contact. Indirect infection of skin trauma by polluted instruments can also occur. The common treatment methods are: the wart is scraped using curet; brucea fruit is spread onto the wound; laser using CO₂ or freezing using liquid NH₃ is adopted. However, the recurrence and local infection rate is high. The operation of YAG laser is simple and can close local blood vessel automatically and develops a clear observation during the operation. It’s a usual method treating common warts. However, it will cause relatively large damage to skin besides the dermatosis and the healing rate of the wound is
commonly low. MEBO can accelerate the healing of the wound and also has anti-infection function. The earlier healing of the wound in group III than that in group I and group II is the proof. The recurrence rate of group III in the half year’s follow-up was low and it was superior to that of group I and group II. MEBO can restrain the synthesization of DNA of human papilloma virus and so it can restrain the growth of warts. In addition, MEBO can dissolve the cutin and can promote blood circulation to remove blood stasis and can clear away heat and toxic materials. It can accelerate the erosion and defluxion of warts until the wound heals. MEBO has fine pain-killing function and can relieve the pain 10 minutes after the application. It is another advantage of MEBO and is consistent with reports. Using YAG laser in combination with MEBO treating common warts is an ideal method.

Reference


