

Falknor's Needling for Verruca Pedis Information sheet

Verrucae are a notorious source of frustration for both patient and Podiatrist due to their unpredictable response to treatment. Falknor's Needling is an innovative treatment which is suggested to be around 50-69% successful in a single treatment. It serves as a great treatment alternative for patients who are unable to follow weekly or fortnightly treatment regimes (of acid or freezing) and for those where all other treatment methods have failed.

Falknor's Needling is performed under local anaesthetic and is the process of puncturing the Verruca multiple times with a sterile needle. It works by breaking down the verruca and exposing particles of the virus to the fatty tissue beneath the skin. There the body is rich with cells that can detect and fight the verruca virus. As the immune response is often systemic, treatment of only one verruca is required (if you have more than one) as spontaneous resolution often occurs in all, or most, verrucae at the same time.

Following the procedure, you will have a post-operative dressing and be given a re-dressing appointment. We ask you to rest for the remainder of the day and avoid driving for 24 hours. Following this you will be able to start your normal activities within your comfort level; most patients describe post-operatively that the area feels 'bruised'.

We consider this a safe treatment although like any procedure there are risks which include; allergy to the local anaesthetic (anaphylaxis), post-operative infection, prolonged numbness, prolonged healing, pain, scarring, bleeding and reoccurrence.

If you wish to go ahead with verruca needling; please bring with you a list of your medications, an inhaler if you're asthmatic and a pair of wide/deep shoes. You will also need to arrange transport to and from the clinic as you will not be able to drive home.

The Procedure

Dry needling is performed under local anaesthetic 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 24-48hrs. The anaesthetic will start to wear off in three to six (3-6) hours depending on which anaesthetic is used, but do not be concerned if it takes a little longer as





the effects vary from person to person. After 24-48 hours showering is permitted and life can continue as normal. There may be some slight discomfort for the first couple of days.

The site of the procedure will be checked by your podiatrist after 1-2 weeks to check healing and remove scabbing and again after eight weeks to measure the degree of regression of the verrucae.

How successful is the treatment?

Until recently, there was very little information on success rates. However, a recent paper has demonstrated:

- 31 patients (69%) had complete resolution
- 3 patients had reduced size and pain
- 11 showed no improvement
- There were no post-operative infections or scarring
- Only mild symptoms were reported bruising, slight discomfort

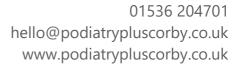
The paper is available at: https://www.mdpi.com/2077-0383/2/2/13/htm

However, a more recent paper - http://usir.salford.ac.uk/id/eprint/42625/ concluded that a single treatment was no more effective than removing the callus. This would indicate that a single treatment is less effective and that patients may need more than one treatment to get the better outcomes observed in the first paper.

DISCLAIMER

As with all verrucae treatments no guarantee of success is given when treating verrucae as treatment of viral infections can often be unpredictable.

Important information for the day of the dry needling





- You can eat before dry needling.
- Arrange a lift home with someone, as you will not be covered by your car insurance to drive.
- 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.

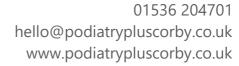
Initial aftercare

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

- Avoid driving for 24hours
- Keep the dressing dry for 24-48 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 this helps the blood to clot and promotes healing
- Avoid taking NSAIDs or other anti-inflammatory medication for 48hrs to increase the likelihood of a successful controlled inflammatory response. Wound inspection and debridement of any uncomfortable eschar will be performed 1-2 weeks after the procedure.
- 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 or the Podiatrist directly 01536 204701 / 07756 545217.

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 one to two (1-2) 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.







Patient agreement to dry needling verrucae treatment

Patient's surname	
First name	
Date of birth/	





Name of proposed procedure or course of treatment:

Verrucae dry needling, the introduction of a sterile needle into a verruca to provoke an immune response and resolution of a verruca or verrucae. It requires a local anaesthetic injection to numb the foot.

I have explained the procedure and what it will involve to the patient. In particular, I have explained the following intended benefits:

Resolution of verrucae and reduction or eradication of pain

The following serious or frequently occurring risks:

- Allergic reaction to anaesthetic
- Post-treatment pain
- The treatment may not resolve the verrucae
- Infection
- Nerve damage as a result of the injection to numb the foot

To be completed by the patient

I confirm that the procedure has been satisfactorily explained to me and that I wish to go ahead with the procedure.







Name (PRINT)
To be completed by the podiatrist on the day of the procedure
Confirmation of consent: I have confirmed with the patient that s/he has no further questions and wishes the procedure to go ahead
Signed
Name (PRINT)
Podiatrist
Date//

