

# Genital Warts

*Dr. Sabni's Homoeopathy Clinic & Research Center Pvt. Ltd*

*Dr. BS Sabni*

## Introduction

Genital warts, also known as Condylomata Acuminata or venereal warts, are one of the most common types of sexually transmitted diseases.

As the name suggests, genital warts affect the moist tissues of the genital area. They may look like small, flesh-colored bumps or have a cauliflower-like appearance. Genital warts may be as small as 1 to 2 millimeters in diameter — smaller than the width of a ballpoint pen refill — or may multiply into large clusters.

In women, genital warts can grow on the vulva, the walls of the vagina, the area between the external genitals and the anus, and the neck of the uterus. In men, they may be found on the tip or shaft of the penis, the scrotum or the anus. They can also develop in the mouth or throat of a person who has had oral sexual contact with an infected person.

The virus that causes them — the human papillomavirus (HPV) — is one of the most common causes of sexually transmitted infection (STI) in the world. More than 100 different types of HPV exist, most of which are harmless. About 30 types are spread through sexual contact. These strains of the virus are highly contagious and spread through sexual contact with an infected person. Many people infected with HPV have no symptoms.

There are high-risk and low-risk types of HPV. High-risk HPV may cause abnormal Pap smear results, and could lead to

## Signs and Symptoms

The signs and symptoms of genital warts include:

- Tiny, gray, pink or red swellings in your genital area that grow quickly
- Several warts close together that take on a cauliflower shape
- Itching or burning in your genital area
- Discomfort, pain or bleeding with intercourse

Often, however, genital warts cause no symptoms. Or, they may be so small and flat that they can't be seen with the naked eye. In order to detect these warts, your doctor may apply an acetic acid solution to your genitals to whiten any warts that are present. Then, he or she may view them through a special microscope called a colposcope.



**Figure 1**

## Diagnosis

Genital Warts are usually diagnosed by seeing. If you are a woman with genital warts, you also should be examined for possible HPV infection of the cervix. It is also possible to identify some otherwise invisible warts in your genital tissue by applying vinegar (acetic acid) to areas of your body that might be infected. This solution causes infected areas to whiten, which makes them more visible.

For women, it's important to have a regular pelvic exam and Pap test, which can help detect vaginal and cervical changes caused by genital warts or the early signs of cervical cancer, a possible complication of HPV infection.

Start having Pap tests within three years of your first sexual encounter or by age 21, whichever comes first. Talk with your doctor about the right screening schedule for you going forward.

If you've had genital warts, you may need to have a Pap test every three to six months, depending on the severity of your condition. You may be able to reduce the frequency of your Pap tests after having three normal test results in a row.

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## Case Report

A male patient with complaints of irritations & eruption on penis consulted Dr. Anjan, who advised him for Blood Tests for CBC, & Blood Sugar and VDRL and accordingly prescribed conservative medicines. However, without getting any relief the patient consulted a dermatologist on 21.08.2004 and diagnosed it as a case of Herpes Simplex and put him on anti Herpes treatment.

The patient again consulted Dr. Anjan on 6.9.04, as he was not getting any relief from the dermatologist's treatment. The patient was advised to go for IgG for Herpes Simplex 1 & 2, VDRL & Blood Sugar and advised to continue the ongoing treatment. Dr. Anjan referred the patient on 8.9.04 to Professor Dr. Rattan Singh for expert opinion and treatment. Dr. Rattan Singh prescribed the patient some additional medicines along with the ongoing dermatologist's treatment.

With no relief in the condition the patient discontinued the treatment. In the month of December 2004 the patient noticed cauliflower like growth on the penis (See *figure 1 & 2*). The patient consulted some local physician who advised the patient to apply podophyllin solution locally which resulted in burn like symptoms.



**Figure 2**

Fearing the worst the patient again rushed back to the consulting dermatologist on 31.12.04, who in turned diagnosed it as a case of genital wart. The dermatologist advised the patient to apply Fudic-B cream locally. Follow up on 11.2.05 with the dermatologist, patient was advised to apply Podophyllin lotion locally. The patient again consulted Dr. Rattan Singh on 19.3.05 for further treatment. On 24.3.05 Dr. Rattan Singh advised the patient to continue the treatment of the dermatologist at Bombay.

On the next follow up dated 1.03.05 the dermatologist finally recorded that the patient is resistant to Podophyllin and advised the patient to apply Imoquad cream. The treatment was continued up to 17.3.05 where in the dermatologist finally advised the patient to go for Laser surgery to get rid of the Genital Warts as the growth was enormous.

Fearing the surgery the patient consulted Homoeopathy Clinic on 30.3.05. Seeing the uniqueness of growth of the warts on the penis, photographs were taken for reference. The patient was initially prescribed Acid Nitric 1M, one dose daily empty stomach for 5 days and was kept on placebo for one week. After two weeks of initial treatment, the patient was prescribed Cinnabaris 30 and was asked to continue the medicine for six weeks. However, there was no remarkable change in the condition of the patient. On 1.6.05 the patient was prescribed Thuja 10M, five doses with the instructions to take one dose daily empty stomach and report back after two weeks duration. There was again no change in the condition and it was decided to repeat Acid Nitric 50M, 5 dose with the instructions to take one dose daily empty stomach. The patient reported back on 13.7.05 with a no visible changes in the conditions of the genital warts.

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## Case Report

Based on the failures of above prescribed medicines it was again decided to examine the case as fresh. It was subsequently found that Sabina has the same symptoms in lowest grade but not as remarkably indicated in Thuja & Acid Nitric.

On consulting the Materia Medica, was found that Sabina will act on “Sycotic excrescences with burning soreness, Fig Warts with intolerable itching and burning; exuberant granulations”. In view of these symptoms the patients was again examined and it was observed that the warts has very close resemblance of granulation as mentioned in Sabina. Though Sabina primarily is a women’s remedy and most commonly used for uterine hemorrhages/ metrorrhagia and the patient, a male, it was decided to prescribe Sabina 1M, five doses, once daily empty stomach followed by placebo for 3 weeks.

The follow up after the completion of the Sabina prescription reported positive results with the clearing of all the genital warts except slight ulcers (See *figure 3 & 4*). The application of Calendula Ointment for one week cleared the post warts ulcers also.



**Figure 3**



**Figure 4**

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## Conclusion

The most indicated homoeopathic remedy for warts: Thuja, Acid Nitric and Cinnabaris failed to remove the presence of warts on the penis in the said case. Sabina, however, being a women’s remedy and less indicated & rarely used in the treatment of genital warts acted promptly in the said case.

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## Acknowledgement

Special thanks to the patient who kindly supplied us with all the case documents and allowed us to take photographs of Genital Warts for publishing this case to Homoeopathic Community.

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**SUNDAY OFF**

Phone : (0091) - 11-22753296

**CONSULTANT PHYSICIAN, JOINT DISEASE & FERTILITY EXPERT**

**DR. ANJAN DE**

M.B.B.S (A.I.I.M.S.) M.R.C.P. (LONDON)

Regd. No. MC13826

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Barnsley District General Hospital (UK)

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Medicine, Skin and V.D., Accident and

Emergency, I.C.U. : A.I.I.M.S.

Ex-Research Officer, ICMR - W.H.O.

Fertility Project

**Member :**

Royal Society of health (LONDON)

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(Opposite Sanskriti School)

Chanakya Puri

Tuesday - Friday - 3 P.M. - 5 P.M.

Tel: 24121389 - 94

Dated

2/8/13

**Brief Clinical Notes**

*Eg, dnt*

*P.P.*

Investigation

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**PLEASE BRING PRESCRIPTION IN YOUR NEXT VISIT**

Blood Sugar (Glucose Meter), Vaccination, E. C. G., Dressing Laboratory Test Available

D.P.T., Polio, Measles, M.M.R. Meningitis, Typhoid, Hepatitis Vaccination Available

PANEL DOCTOR @ British High Commission & British Council Library @ Bangladesh High Commission

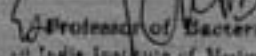
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**DR. DE'S DIAGNOSTIC CENTRE**

197-B, POCKET-1, MAYUR VIHAR PHASE-I, DELHI-110091.

Name: <u>MV K V Malhotra</u> Lab. No. <u>199/04</u>																			
Age: <u>58yr</u> Sex: <u>Male</u> Date: <u>2/8/04</u>																			
<b>Blood Counts :</b> <input checked="" type="checkbox"/> Haemoglobin <input checked="" type="checkbox"/> Total Leucocyte Count <input checked="" type="checkbox"/> Differential Count Polymorphs Lymphocytes Monocytes Eosinophils <input checked="" type="checkbox"/> Erythrocyte Sedimentation Rate (Wintrobe/Westergrens) 5. Peripheral Smear for Haemoparasites 6. Red Cell Counts 7. Clotting Time 8. Bleeding Time 9. Platelet Count 10. Prothombin Time 11. Blood Groupint & Rh typing 12. C-Reactive Protein <b>Special Test :</b> 1. Rheumatoid Fator <input checked="" type="checkbox"/> V.D.R.L. 3. Widal Test	<table border="1"> <thead> <tr> <th>Result</th> <th>Normal Range</th> </tr> </thead> <tbody> <tr> <td>14.6</td> <td>11.5 - 17.5</td> </tr> <tr> <td>7000</td> <td>4000-9000</td> </tr> <tr> <td>68</td> <td>40-75</td> </tr> <tr> <td>30</td> <td>20-45</td> </tr> <tr> <td>01</td> <td>02-10</td> </tr> <tr> <td>01</td> <td>01-06</td> </tr> <tr> <td>08</td> <td>Upto 20</td> </tr> <tr> <td colspan="2" style="text-align: center;"><u>NON REACTIVE</u></td> </tr> </tbody> </table>	Result	Normal Range	14.6	11.5 - 17.5	7000	4000-9000	68	40-75	30	20-45	01	02-10	01	01-06	08	Upto 20	<u>NON REACTIVE</u>	
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<u>NON REACTIVE</u>																			
4. Thyroid Function Tests T3 T4 T.S.H. 5. Hormone Assays L.H. F.S.H. G. H. 6. HBSAG																			

	Result	Normal Range
<b>BLOOD CHEMISTRY</b>		
✓ 1. Blood Sugar (Fasting) Mg/dl	Glucose 142	80 - 110
2. Postprandial P.P. 2 hours sugar mg/dl		Upto 140
✓ 3. Random Sugar mg/dl		Upto 170
4. Blood Urea mg/dl		15 - 42
5. Serum Creatinine mg/dl		0.5 - 1.2
6. Bilirubin (Total) mg/dl		0.2 - 1.0
7. Bilirubin (Conjugate) mg/dl		Upto 0.4
8. Total Protein G/dl		6.2 - 8.2
9. Albumin G/dl		3.6 - 5.2
10. Globulin G/dl		2.4 - 3.7
11. Alkaline Phosphatase KA Units		3 - 13
12. S.G.O.T. IU/L		5 - 35
13. S.G.P.T. IU/L		5 - 40
14. Cholesterol mg/dl		150 - 250
15. Triglycerides mg/dl		40 - 170
16. Total Lipids mg/dl		400 - 700
17. H.D.L. mg%		35 - 65
18. L.D.L. mg%		70 - 90
19. Acid Phosphatase U/dl		1 - 3.5
20. Serum Uric acid mg/dl		2.5 - 6.5
21. Serum Amylase S.U.		50 - 150
22. C.P.K. IU/K		10 - 50
23. L.D.H. IU/L		100 - 300
24. Calcium mg/dl		8.5 - 10.5
25. Sodium m Eq/L		132 - 144
26. Potassium m Eq/L		35 - 5.0
27. Chloride m Eq/L		98 - 109
	Pathologist	

  
 Professor of Bacteriology  
 All India Institute of Medical Sciences  
 NEW DELHI-110

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Dr. Dipak S. Kulkarni, M.D. (Skin & V.D.)

Dr. Mrs. Supriya Bhat, M.B.B.S., D.V.D.

Cosmetic Treatments : Mrs. Geeta Kulkarni

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10.30 a.m. to 2.00 p.m.

1ST CONSULTATION on 21/08/2004

Date :

K. V. MATHEW, 45

CHENGALPET Panvel

Diagnosis:- HERPES GENITALIS

Rx:

ACIVIR CREAM

&

SILVEREX OINT.

APPLY 5 TIMES, ONE AFTER ANOTHER

TAB. ZOVIRAX 200 MG: 5 TIMES A DAY [25 TAB.]

Dr. Dipak S. Kulkarni

M.D. (Skin & V.D.)

Reg. No. 55300/31/12/85

Tab Ciprox-IZ

2 10

Tab flexon

1 10

25/8/04

Tab Macclar 250mg 10 + 10

1 7.5 दिन

Tab flexon → 2 10

Zovirax - 4 बार - 2 दिन

Acivir cream - 2 बार

+ Monistat plus

Nadexin cream

2 10

Alu. acetate - 400 ml. 2 10

Shah Plaza 1st Floor, Behind Adarsh Lodge, Gadanki Road, PANVEL-410206, Dist. Raigad (022) 2745 1143, 2746 2620

शहा प्लाजा, आदर्श लॉजच्या मागे, गडकरी मार्ग, पनवेल-४१०२०६, जि. रायगड. फोन (०२२) २७४५ ११४३/२७४६ २६२०

E-mail address : drdsk@vsnl.com • Web page : http://personal.vsnl.com/alok\_clinic

रविवार बंद SUNDAY CLOSED



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Tel. : 24121389 - 94

Dated 6/9/03

## Brief Clinical Notes

Hx of  
No genital

## Investigation

Mr Matthew Fyfe, Fyfe  
 Herpes simplex virus (HSV2)  
 VDRL  
 HIV To II Elisa  
 Legatum  
 Eshay 68  
 C6/19 Acheva  
 Miletin  
 Continin, Nadoxin cream locally for  
 Maclear 250 1hr  
 Addo, Kinetin-N or SW15  
 1hr - (6)  
 An

PLEASE BRING PRESCRIPTION IN YOUR NEXT VISIT

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D.P.T., Polio, Measles, M.M.R. Meningitis, Typhoid, Hepatitis Vaccination Available

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website : www.eskaylab.com e-mail: eskaylab@yahoo.com  
MON-SAT : 8 am to 7.30 pm SUNDAY : 8 am to 12 noon

**DR. SUBODH K. GUPTA**  
MBBS, MD (Path)

**ISO 9001 : 2000 Certified Laboratory**  
**Reference Laboratory : IAPM-NEQAP**

Date 06/09/2004 Srl.No. 9

Name MR. K N MATHEW

Age 55 Yrs.

Sex M

Refd.By Dr. DE ANJAN MBBS MRCP

## INVESTIGATION

## PATIENT'S VALUE

## UNITS

## REFERENCE RANGE

### IMMUNOLOGY & SEROLOGY

#### HERPES SIMPLEX VIRUS 1 & 2 IgG AB TITRE

Eisa

#### PATIENT'S TITRE

0.42

AI

(NEGATIVE)

#### INTERPRETATION

> 1.1 Positive  
0.9-1.1 Equivocal / Borderline  
< 1.1 Negative

Herpes Simplex Virus types 1 and 2 are large complex DNA containing viruses. The majority of primary genital herpes infections & recurrent genital herpes infections are caused by HSV-2. Non genital herpes infections such as common cold sores are caused primarily by HSV-1. Asymptomatic infection may happen for HSV in apparently healthy individual & during pregnancy.

#### HERPES SIMPLEX VIRUS - 2 IgM AB TITRE

Eisa

#### PATIENT'S TITRE

0.76

AI

(NEGATIVE)

#### INTERPRETATION

> 1.1 Positive for IgM Ab to HSV-2 indicates probability of current/recent inf.  
0.9 - 1.1 Equivocal / Borderline  
< 0.9 Negative for IgM Antibody to HSV-2.



**Dr. SUBODH K. GUPTA**  
M.B.B.S., MD (Path)





# Eskay Lab

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MBBS, MD (Path)

**ISO 9001 : 2000 Certified Laboratory**  
**Reference Laboratory : IAPM-NEQAP**

Date	06/09/2004	Srl.No.	9
Name	MR. K N MATHEW	Age	55 Yrs.
Refd By.	Dr. DE ANJAN MBBS MRCP	Sex	M

INVESTIGATION	PATIENT'S VALUE	UNITS	REFERENCE RANGE
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## IMMUNOLOGY & SEROLOGY

VDRL Tech RPR	Non Reactive
ANTIBODIES against HIV 1 & 2 Tech Elisa	Non Reactive



**Dr. SUBODH K. GUPTA**  
M.B.B.S., MD (Path)



89

Refd to Prof Natten Singh

A-2 Swastik Vikes

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for

express opinion & My plan

✓

11/11/11

**PROFESSOR (Dr.) RATAN SINGH**

B.Sc., M.B.B.S., M.D., D.V., F.C.A.I., F.I.A.M.S.

PROF. &amp; HEAD OF THE DEPT. OF SKIN &amp; V.D. (Rtd.)

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RES-CUM-CLINIC : 6 p.m. to 8 p.m. (Daily)

**Dr. KAMLENDER SINGH**

M.B.B.S., M.D., F.I.M.S.A.

SENIOR CONSULTANT DERMATOLOGIST &amp; VENEREOLOGIST

SIR GANGA RAM HOSPITAL, NEW DELHI

EX. FACULTY MEMBER, DEPTT. OF SKIN &amp; V.D.

All India Institute of Medical Sciences, New Delhi

On Panel : BEL, CCICI

RES-CUM CLINIC : 9 a.m. to 11 a.m. (Mon., Wed., Thur., Sat.)

SIR GANGA RAM HOSPITAL : 12 Noon to 2 p.m. (Daily)

SAMA NURSING HOME : 4 to 5-30 p.m. (Mon., Wed., Fri.)

SANJIVAN HOSPITAL : 6 p.m. to 8 p.m. (Mon., Wed., Fri.)

Date : 8.9.04

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4869/24, Ansari Road,  
Darya Ganj, New Delhi-2  
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Private OPD, R.No. 141 (1st Floor)  
Sir Ganga Ram Road, New Delhi  
Tel. : 25762672, 25762673, 25762674✓ SAMA NURSING HOME  
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New Delhi-110049  
Tel. : 26252062, 26251293

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24.3.05

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- To continue no. 2 & 3 as on 19.3.05

- To continue his treatment at Bombay  
Don.

SUNDAY CLOSED

RAMA WING HOME  
5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000

SUNDAY CLOSED

SUNDAY CLOSED

# ALOK CLINIC : CENTRE FOR SKIN CARE

## Consulting Dermatologists :

Dr. Dipak S. Kulkarni, M.D. (Skin & VD)

Dr. Mrs. Supriya Bhat, M.B.B.S., D.V.D.

Dr. Mrs. Preeti Atr, M.B.B.S., D.D.V.

Cosmetic Treatments : Mrs. Geeta Kulkarni

10.00 a.m. to 2.00 p.m. & 6.00 p.m. to 9.00 p.m.

4.30 p.m. to 8.00 p.m. ( Mon. to Fri. )

9.30 a.m. to 2.00 p.m. ( Mon. to Sat. )

10.30 a.m. to 2.00 p.m.



FOLLOW UP on 01/03/2005

Date :

K. V. MATHEW. M55

PANVEL

Diagnosis:- GEN.WARTS

RESISTANT TO PODO

Rx  
IMIGUAD CREAM : THRICE WEEKLY

FUDIC-B CREAM : TWICE DAILY

Dr. Dipak S. Kulkarni

M.D. (Skin & V.D.)

Reg.No.55300/31/12/85

14/3 @ podos as NR E Imiquinol

17/3

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2002  
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