What happens next?

After this process, if the diagnosis of AGW is confirmed, then all children are referred to children's social care. This allows the gathering of information about many aspects related to your child.

A meeting will be held with children's social care, specialist paediatric doctors and sometimes the Police. During this meeting specialists will look into all possible causes for infection.

It may be that the professionals do not feel any further action needs to be taken. It may be decided that your child needs a more thorough examination to consider sexual abuse. The medical assessment, if required, will be with a specialist paediatrician and involves an examination of your child which is not an internal examination and does not include a speculum.

This referral process may be a distressing for a family, so all medical staff will do their best to be sensitive to your family's needs.

Can warts be treated?

Yes. They can be treated with a cream called Imiqimod which your child will need to use three times a week for up to 16 weeks.

Sometimes warts are left alone to go away on their own, which can take from a few months to 2 years.

Will my child need ongoing treatment?

It is likely that your child will be seen by a Paediatrician in the outpatient clinic and (depending on your child's age and other factors) they may be offered the HPV vaccination.

This leaflet is intended for patients receiving care in Brighton & Hove or Haywards Heath



Produced by Safeguarding Children's Team
Ref number: 2030
Publication date: May 2021. Review date: May 2024



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AGW advice for parents

This leaflet has been designed to give you some understanding of what needs to happen if your child is found to have anogenital warts (AGW).

What are anogenital warts?

Anogenital warts are small, flesh-coloured growths that are found in a particular area, often around the anus (the hole in the bottom), the labia (the vaginal 'lips') and other parts of the genitals in girls, or the penis and scrotum in boys.

They can occur on their own or in groups. They have a bumpy surface similar to a raspberry or cauliflower. They generally do not cause any harm, but young people may not like the look of them. Occasionally they can be itchy or cause mild bleeding.

Anogenital warts are caused by a virus known as HPV (human papilloma virus).

Where do these warts come from?

Warts in this area can be sexually transmitted. In younger children they can be transmitted from the mother to the baby during birth.

It is possible warts can be transferred by skin to skin contact but the evidence for this is not strong.

How can we be sure how my child got these warts?

It is extremely difficult for doctors to know when anogenital warts may have been contracted. Also there is very little research into how children can contract warts.

The Royal College of Paediatrics and Child Health has published a recommendation that in all children with confirmed genital warts, sexual contact must be considered.

Medical professionals' main concern will be for the child and the consideration of the possibility of sexual transmission. This is why a referral and assessment process has been developed so that all children are safe and managed in the same way. The safety of children is of paramount importance and therefore information sharing with social care and other agencies is necessary.

What does this process involve?

Firstly a doctor will talk to you and your child. They may have to ask you intimate and potentially upsetting questions. This is so the doctor can protect children. In older children we will request to speak to them alone (if they are happy doing this). This is so that we can get a full picture of your child's life and environment.

Following this the doctor is likely to examine your child by looking at the affected region. They will likely request for photographs to be taken if you and your child agree (consent) to this. Photographs are particularly useful if the diagnosis is difficult, as sometimes we have to ask other specialists to review the images. These photographs will be taken by trained professional medical photographers and stored in a secure way within the patient notes.

Doctors may also take urine samples and swabs, checking for any other possible infections.