
Everything You Need To Know About Molluscum

Molluscum contagiosum is a wart-like skin infection. It is caused by a virus that most often affects children. Most adults are immune and the virus does not affect pets. People usually catch molluscum by touching similar bumps on another person. The bumps spread by rubbing or scratching. It may be possible to catch molluscum by sharing a bathtub or towel. It is unlikely to spread to others in a swimming pool. The bumps usually appear within 6 weeks after contact. Many people get only a few small bumps that go away without ever being noticed. Molluscum does not affect internal organs, even in people with very low immunity. Like many other viral infections, molluscum always resolves without treatment. However, the number and size of the bumps associated itching and duration of the infection depends on an individual's immune response.

Molluscum infection always goes away without treatment. A single molluscum can persist for 3 weeks – 3 months. The infection usually runs its course after 6 -12 months, but a rare child will have bumps for 3-5 years. After the bumps disappear, immunity lasts a lifetime. Among family members, the infection is more likely to spread to younger than older family members. Adults who have not been exposed in childhood and are not immune can get the infection with sexual contact.

Children with sensitive skin are more susceptible to prolonged or widespread molluscum. The sight of the bumps and possibility of embarrassment often bothers caregivers more than their affected children. Children are sometimes bothered by itching. Individual bumps will occasionally swell up, become red, or scabbed over. Sometimes the surrounding skin will become rashy, a condition called "molluscum eczema." These changes often cause concern about bacterial infection, but there is no associated pain, fever or illness. The changes are all signs of inflammation, marking an immune response, and the beginning of the long-awaited end of the infection. After healing, molluscum can leave fine, pitted scars. These almost always fade away within a year.

The safest and most cost-effective strategy is to ease the itch and prevent spread while waiting for the bumps to disappear as immunity develops.

To control itch: use a cream containing pramoxine (e.g. Aveeno Anti-Itch Cream, Prax Lotion).

To prevent spread: take showers rather than soak in a bathtub; apply Liquid Band Aid or nail polish to any new or persistent lesions.

Like all diseases without a simple cure, there are many options for treating molluscum. None are FDA-approved or confirmed to be more effective than placebo. The majority of treatments have risks that are greater than the risks of having the disease, or significant costs. No treatment can guarantee effectiveness. One strategy is to destroy skin cells and the virus inside. Of these, cantharidin is most well-accepted. Burning, scraping or freezing is not easily tolerated by most children. Silver nitrate may leave black stains. Cimetidine is an oral medication available in pill or liquid formulation that may help boost immune response, especially in children with sensitive skin and prolonged infection. It works best if taken at a high dose given 2-3 times a day and usually requires 3-6 months of treatment. Creams like Veregen, Aldara or tretinoin may also trigger an immune response, but are expensive and not well-studied. A variety of products that have not been well-studied and are always accompanied by unsupported claims are marketed on the internet (e.g. www.molluscum.com).

Recommended dosing for Cimetidine: 40 mg/kg/day PO divided over BID or TID for 3-6 months.