



MOLLUSCUM CONTAGIOSUM

Written for parents and young people (key stage 2 and above)

What are the aims of this leaflet?

This leaflet has been written to help children and young people understand more about molluscum contagiosum. It tells you what it is, what causes it, what can be done about it and where you can find out more about it. The information will also be helpful to parents.

What is molluscum contagiosum (Pox Virus)

Molluscum contagiosum is a common, relatively harmless viral infection that affects the skin. It appears as raised, pearly lesions on the skin. Molluscum usually develop 2 – 8 weeks after becoming infected with the virus.

Why have I got this condition?

The virus can easily be spread from person to person through close contact or by sharing objects such as shared towels, flannels bed-linen and toys. Not everyone who is in contact with the virus will get skin lesions and how many and how widespread they are varies between people. Molluscum are more common and can be more widespread in children with eczema or children who are taking medication to suppress their immune system. It is important to know that you have not got molluscum because you are dirty.

What are the symptoms?

Molluscum are not usually painful but can cause embarrassment, especially if they are in areas of skin that others can see. Once one area of skin becomes affected the virus can spread to other areas through scratching or squeezing the bumps.

The average duration of molluscum is 12-18 months although in some patients the problem can last for up to 36 months or longer in some people.

Children with active molluscum should not share clothes, towels or flannels because of transmission of the virus.

If attending a creche / playgroup keep lesions covered with clothing. There is no need to stay off school, or stop swimming.

What tests do I need?

No tests are required in most cases. A dermatologist will generally be able to make the diagnosis by looking at the skin.

How is molluscum contagiosum treated?

Treatment is not usually required and particularly in young children, nothing more than waiting for the infection to clear over time is required. Sometimes, if the molluscum are causing problems specific treatments can be tried. Treatments include freeze treatment (cryotherapy- see information leaflet on **cryotherapy**), curettage (scraping away the bumps) or use of topical preparations such as potassium hydroxide. Cryotherapy and curettage treatments have a small risk of scarring the skin

Why treat Molluscum Contagiosum and skin around molluscum contagiosum?

Molluscum often do not need treatment as they will get better over time. Treatments will only be able to treat individual spots and may not make any difference to how long the spots last.

Sometimes an eczema-like reaction (redness, itch and scaling) can develop around the area with molluscum. This can be treated with a moisturiser and a steroid cream or ointment. Children with eczema can get molluscum in areas of eczema. The eczema should still be treated as recommended with topical anti-inflammatory treatments (steroid cream or ointment).

The molluscum spots can become angry and look as though they are infected. This is often the body's immune response against the virus and is generally a good sign that the infection is being noticed and the immune system may work to clear the molluscum. It can be managed with a little topical antiseptic. A scar is not usually left when the molluscum go away on their own, but a tiny dent or mark in the skin may remain.

What can you expect?

After an episode of molluscum has cleared, further infection is a rare occurrence.

Where can I get further information?

NHS conditions website

<https://www.nhs.uk/conditions/molluscum-contagiosum/>

Patient information website

<https://patient.info/childrens-health/viral-skin-infections-leaflet/molluscum-contagiosum>

British Association of Dermatologist website

<https://www.bad.org.uk/patient-information-leaflets/molluscum-contagiosum>

<https://www.skinhealthinfo.org.uk/condition/molluscum-contagiosum/>

For details of source materials used please contact the Clinical Standards Unit (clinicalstandards@bad.org.uk).

This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Society for Paediatric Dermatology which is a part of the British Association of Dermatologists. Individual patient circumstances may differ, which may alter both the advice and treatment given by your doctor

This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel

**BRITISH ASSOCIATION OF DERMATOLOGISTS
PATIENT INFORMATION LEAFLET
PRODUCED APRIL 2021
REVIEW DATE APRIL 2024**