



Texas Children's Hospital
Dermatology Service

PCP Referral Guidelines- Molluscum Contagiosum

Diagnosis/symptom: **MOLLUSCUM CONTAGIOSUM**

Please follow Guidelines for at least 2-3 months prior to the initiation of referral.

Referring provider's initial evaluation and management should include:

Molluscum is a benign process in children. Lesions generally involute spontaneously within months to years. Treatment by the PCP may be reasonable if lesions are numerous (>15), spreading, or cosmetically or functionally significant.

(treatment options are limited for lesions on the eyelids)

Treatment options based on location of lesions.

- Face/neck/groin/axilla/genitalia (treat with application of topicals at home—see below)
 - Aldara cream 3-5 nights per week as tolerated
 - Tretinoin cream 0.025% or Retin A Micro 0.04% gel 3-5 nights per week as tolerated
 - Extremities/trunk
 - in-office treatments if available, or with application of topical at home
 1. in-office treatment, if available
 - Cantharidin
 2. application of topical at home (see above)
 - Eyelids
 - Observation only
 - Aldara cream (as above)
- * If eye symptoms, refer to ophthalmology.

At home topical treatments may include:

- Tretinoin cream 0.025% or Retin A Microgel 0.04%
- Imiquimod (Aldara) cream

(all have the potential for irritation and should be initiated three nights weekly and increased to nightly as tolerated. Expect several weeks to months for improvement/resolution.)



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Other treatments based on expertise of PCP:

Plain Cantharidin 0.7% (Green Bottle)

Canthacur Treatment (see page 3)

NOT FOR USE ON FACE OR DIAPER AREA

(apply directly to lesions with wooden end of cotton tipped applicator. Allow to dry. **Do not occlude.** Instruct parent to wash all areas with gentle soap and water 4 hours later. Expectation is blistering within 24-48 hours with healing over next 10-14 days)

Cantharidin P.S. (Red Bottle) 1% Cantharidin/5% podophyllin/30% salicylic acid NOT recommended for inexperienced users.

Please note:

- We do not treat molluscum contagiosum with laser.
- We very rarely treat molluscum contagiosum with cryotherapy or curettage removal.



Canthacur Treatment

What it does Treats warts and molluscum contagiosum

Tips on giving it This medicine is only applied in the clinic by a doctor or nurse.

Be careful ***Wash the medicine off at _____ o'clock.*** The medicine needs to remain on the skin until then to work its best. However, if the child complains of pain before this time, wash the medicine off right away.

You may see a lot of little blisters on the skin. If the medicine is not washed off at the right time, the blistering can be severe.

The day after treatment, the blisters may enlarge and fill with fluid. This can be painful. To relieve the pain, make a tiny hole in the blister with a sterile needle. (If the clinic didn't give you one, you can dip a pin or sewing needle in alcohol and wipe it dry.) Press the blister gently to squeeze out the fluid. Be sure not to remove the skin over the blister. This covering helps prevent infection.

Side effects The treated area of your child's skin may also itch or look red after treatment. Call the doctor if this is bothersome or if there is still burning or stinging after any large blisters are popped.

It is rare, but anyone can have allergic reactions to any medicine. If you notice hives, swelling of the face, or trouble breathing after the treatment, call 911.