



**Texas Children's Hospital
Dermatology Service
PCP Referral Guidelines- Molluscum Contagiosum**

Diagnosis: **MOLLUSCUM CONTAGIOSUM**

GENERAL INFORMATION:

- Even without treatment, molluscum will resolve in a few months to years, so treatment is not always necessary.
- Recommend avoiding sharing towels and bath water with others. Consider use of a band-aid to cover molluscum in swimming pools.
- It is common to develop a rash around the molluscum (molluscum dermatitis). You may consider a topical steroid to decrease pruritus and inflammation.
- It is common for molluscum to become inflamed, mimicking infection. This is often a good prognostic sign, as it usually signals that the immune system is mounting a response to the molluscum. You may consider a topical steroid to decrease pruritus and inflammation.

TREATMENT RECOMMENDATIONS:

- If family desires treatment, please start tretinoin 0.025% cream. Please apply sparingly with Q tip to avoid normal surrounding skin. Please allow a 3-6 month trial BEFORE referring to dermatology. Frequency of use depends on amount of irritation, patient experiences.
 - Eyelids: usually tolerated 3 times week.
 - Face: usually tolerated 3-5 times per week.
 - Body: usually tolerated 3-7 times per week.
- Other treatments based on expertise/availability of PCP: cantharidin, trichloroacetic acid (TCA), cryotherapy

REFERRAL GUIDELINES:

- Please follow Guidelines for at least 3-6 months prior to the initiation of referral.
- We do not treat molluscum contagiosum with laser.
- We do not routinely offer curettage (“surgical”) removal.