

Molluscum Contagiosum

WHAT IS MOLLUSCUM?

Molluscum contagiosum is a common viral infection in children. It causes bumps on the skin including the eyelids and eyelid edges (ocular molluscum). The bumps are 2-5mm in size, pink or skin-colored, usually pearl-like and dome-shaped with a central crater. There may be only one bump, or a group of bumps. [See figure 1].



Fig. 1: Typical lesions of molluscum contagiosum.

HOW IS OCULAR MOLLUSCUM DIAGNOSED?

The mollusca have a typical appearance so often no biopsy or further testing is needed to diagnose them. If mollusca are removed, a pathologist can confirm the diagnosis from a tissue sample. Sometimes there is eye irritation or conjunctivitis from mollusca, particularly if the lesions are close to the eyes.

WHAT OTHER DISEASES DOES OCULAR MOLLUSCUM RESEMBLE?

Mollusca can look somewhat the same as warts (verruca vulgaris which often have a rough, hard texture), chicken pox (varicella have fluid-filled blisters), and papilloma (usually in the middle-aged and the elderly with pink with finger-like growths).



IS MOLLUSCUM CONTAGIOUS?

Yes. Mollusca can spread by direct contact, by sharing wash cloths, towels and bath water with someone who has the infection. Scratching or rubbing the bumps can cause them to spread from one body part to another.

HOW CAN MOLLUSCUM BE PREVENTED?

Avoid sharing towels, wash cloths, bath toys and tub water with persons who have molluscum. Molluscum lesions should be covered to avoid spread by direct contact.

WHO GETS OCULAR MOLLUSCUM?

Molluscum contagiosum is a viral infection that occurs most commonly in children and in patients whose immune system is weakened. It is estimated that 5% of children in the United States have had molluscum contagiosum.

IS MOLLUSCUM DANGEROUS?

No. Sometimes, the bumps are itchy, and if the molluscum are near the eyelashes the virus can get into the tears and children may develop red, irritated eyes. [See figure 2]



Fig. 2: Eye redness or conjunctivitis can happen when molluscum lesions are close to the eyelashes

HOW IS MOLLUSCUM TREATED?

Molluscum lesions will usually go away by themselves over six to nine months, but sometimes can last 3-4 years. The lesions may develop surrounding mild redness just before they go away, which has been described as “the beginning of the end.” Lesions can be cut out or removed with freezing treatment (cryotherapy) by a doctor. In children, these treatments often require sedation or general anesthesia. Immunosuppressed individuals may try antiviral medications if lesions don’t respond to removal. These treatments usually eliminate molluscum lesions, but they also can come back. It is important to talk with your ophthalmologist or primary care physician if you have questions about these treatments.

WHEN IS TREATMENT OF OCULAR MOLLUSUM NEEDED?

Treatment may be needed to reduce spread on the body and to others, to reduce scarring and the risk of bacterial infection from frequent scratching or if there are concerns about



the appearance of the lesions. If conjunctivitis is present, the molluscum lesions on or near the eyelid margins need to be removed for the conjunctivitis to go away.

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