

## Review Article

### Molluscum Contagiosum and Homoeopathic cure

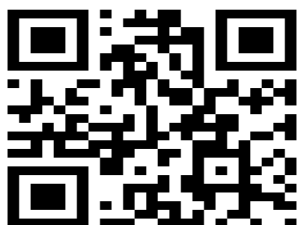
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#### ABSTRACT

Molluscum contagiosum is a viral infection of skin caused by molluscum contagiosum virus (MCV) which leads to single or multiple raised pearl like papules on skin. This affect mostly the children. The virus spread through direct skin to skin contact, through fomites or sexual contact with affected partner. This article discusses the epidemiology, pathogenesis, clinical features, diagnosis and homoeopathic management of molluscum contagiosum.

**Keywords:** Molluscum contagiosum, Homoeopathy and cure



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#### INTRODUCTION

Molluscum contagiosum is a skin infection caused by a virus of the same name. It produces benign, raised bumps, or lesions, on the upper layers of your skin.

The small bumps are usually painless. They resolve without treatment and rarely leave scars. The length of time the virus lasts varies for each person, but the bumps can remain from 2 months to 4 years.

Molluscum contagiosum (M. contagiosum) transmits between people through direct skin contact with someone who has the virus or by touching an object that the virus has contaminated, like a towel or a piece of clothing.

#### High rates of molluscum contagiosum can be associated with

Age

Living in close proximity

Skin to skin contact

Residence in tropical climate

Swimming pool

Child sex has no relation or association to disease state

#### Pathogenesis

Virus

Basal keratinocytes

Increase in cell turnover that extend to suprabasal region

In stratum spinosum mitotic rate decreases and viral DNA synthesis increases

Proliferating cells in follicular epithelium form lobulated epithelial mass compressing dermal papillae

Cytoplasmic aggregation of viral material appear as large hyaline bodies (molluscum bodies)

Eventually destroys cell particularly at center of each lobule

In fully developed lesion a cavity develop with large number of molluscum bodies with little inflammatory infiltrate at adjacent dermis

#### Symptoms of molluscum contagiosum-

If you or your child comes into contact with the M. contagiosum virus, you may not see symptoms of infection for up to 6 months. These symptoms usually take between 2 and 7 weeks to show from the moment you acquire the molluscum contagiosum virus.

You may notice the appearance of a small group of painless lesions. These bumps can appear alone or in a patch of as many as 20. They're usually:

very small, shiny, and smooth in appearance  
flesh-colored, white, or pink  
firm and shaped like a dome with a dent or  
dimple in the middle  
filled with a central core of waxy material  
between 2 to 5 millimeters in  
diameter Trusted Source, or between the size  
of the head of a pin and the size of an eraser  
on the top of a pencil  
present anywhere except on the palms of  
your hands or the soles of your feet —  
specifically on the face, abdomen, torso,  
arms, and legs of children, or the inner thigh,  
genitals, and abdomen of adults

#### **Complications of molluscum contagiosum**

Most presentations of molluscum contagiosum heal without treatment.

But some people experience complications, including: impetigo, or a skin infection that develops after scratching the lesions conjunctivitis, an eye infection that may develop if lesions occur on the eyelid disseminated secondary eczema, which might occur as a result of overreaction to the virus by your immune system widespread molluscum contagiosum that are larger than usual, often on the face (this often develops in people with reduced immunity) sudden scarring with a pitted appearance, either spontaneously or due to lesion removal surgery.



#### **Transmission of molluscum contagiosum**

There are a number of ways that *M. contagiosum* passes between people, including:

**Skin contact with a person who carries the infection** You can get molluscum contagiosum by touching the lesions on the skin of a person who has this infection.

Children can transmit the virus during normal play with other children. Teens and adults are more likely to contract it through sexual contact. You can also become infected during contact sports that involve touching bare skin, like wrestling or football.

**Contact with surfaces that a person with molluscum contagiosum has touched.** The virus can survive on surfaces that has made contact with the skin. It's possible to contract the virus by handling contaminated towels, clothing, toys, or other items.

**Sharing sports equipment that has had contact with a person who has molluscum contagiosum.** The virus can remain on equipment for transmission to another person. This includes items like baseball gloves, wrestling mats, and football helmets.

**Internal spread.** If you have molluscum contagiosum, you might spread the infection throughout your body. You can transfer the virus from one part of your body to another by touching, scratching, or shaving a bump and then touching another part of your body. Transmission seems to take place more in wet environments, like during children's shared swimming classes. If skin lesions are no longer visible, the virus can no longer pass from your body to that of another person.

#### **Risk factors for molluscum contagiosum-**

Anyone can get molluscum contagiosum, but certain groups of people are more likely to acquire the virus and experience symptoms than others. These groups include:

children between the ages of 1 and 10 years Trusted Source people who live in tropical climates people with weakened immune systems due to organ transplants, cancer treatments, or living with health issues that affect the immune system like HIV people who have atopic dermatitis, a common form of eczema that causes scaly, itchy rashes

people who participate in contact sports in which skin-to-skin contact is common, like wrestling or football,

#### **Homoeopathic management**

Homoeopathy is able to succeed in many clinical conditions because of the standard

principles upon which it is strongly built.

Molluscum contagiosum can also be cured effectively with homoeopathic medicines and it also prevents the recurrence.

#### RUBRIC SELECTION

#### MURPHY R-HOMOEOPATHIC MEDICAL REPERTORY

**Diseases-MOLLUSCUM contagiosum**  
:Brom. bry. calc. Calc-ar. kali-i. lyc. merc. merc-sul. Nat-m. Sil. sulph. teucr. Thuj.

#### BOERICKE W-POCKET MANUAL OF HOMOEOPATHIC MATERIA MEDICA WITH INDIAN MEDICINE AND REPERTORY

**Skin-molluscum** : Brom. bry. calc. Calc-ar. kali-i. lyc. merc. merc-sul. nat-m. sil. sulph. teucr.

#### SHROYENS F-SYNTHESIS REPERTORY TREASURE EDITION

**SKIN-ERUPTIONS-molluscum-contagiosum;molluscum** :calc. carc. Kali-i. lyc. Merc. phos. sep. sil. sulph. Thuj.

**SKIN – ERUPTIONS – umbilicated** ant-t. kali-bi.

**SKIN – ERUPTIONS – papular**  
Acon. allox. anthrac. aur. bac. beryl. Bry. Calc. caps. Caust. cham. cycl. Dulc. galeoc-c-h. gels. Grin. hippoz. Hydr. Iod. Kali-bi. Kali-c. **KALI-I.** kali-s. keros. lat-m. loxolae. loxo-recl. lyc. Merc. morb. narc-ps. nat-f. petr-ra. Petr. phos. pic-ac. psor. Sep. sil. suis-hep. sulfa. Sulph. Syph. tere-la. thiop. toxo-g. x-ray zinc.

#### S K TIWARI-HOMOEOPATHY CHILDCARE THERAPEUTICS,CHILD TYPES,REPERTORY

**MOLLUSCUM CONTAGIOSUM** :Ambr, ARS, calc, calc-p, caust, con, dulc, graph, hep, kali-i, lyc, MERC, NAT-M, nit-ac, phos-ac, phos, PULS, rhus-t, SIL, staph, SULPH, thuj

#### VAN ZANDVOORT-COMplete REPERTORY

**SKIN-ERUPTIONS-molluscum-contagiosum;molluscum** : BROM. bry. calc. **CALC-AR.** carc. germ-met. Jug-c. kali-i. lepr. Lyc. merc. nat-m. sacch-a. sil. **SULPH.** Teucr.**THUJ.**

#### CLARKE JH-A CLINICAL REPERTORY TO THE DICTIONARY

#### OF MATERIA MEDICA

#### Clinical-molluscum-molluscum

**contagiosum:** Calc. sil

#### THERAPEUTICS

#### Calcarea carb

Molluscum contagiosum.

Unhealthy readily ulcerating flaccid skin.

Glands swollen.

Better in cold air.

Easy relapses, interrupted convalescence.

Children crave egg and eat dirt and other indigestible things.

#### Silicea

Every little injury suppurates.

Delicate pale waxy skin.

Rose colored blotches, umbilicated eruptions with offensive pus.

Scars suddenly become painful.

Eruptions itch only in daytime and evening.

Patient chilly and want plenty of warm clothing.

Rachitic children with large head, open fontanelles and sutures, distended abdomen.

#### Sulphur

Indicated in all sorts of skin eruptions vesicular, pustular etc especially in those who have been treated by medicated soaps and washes and suppressed by ointment and local medication.

Dirty filthy look of skin with filthy odour.

Dry scaly unhealthy skin.

Aggravation warmth of bed, covering, night.

Amelioration open air, uncovering.

#### Thuja

Eruptions on covered parts and worse after scratching.

Left sided affection, chilly patient.

Perspiration sweetish and strong.

Wart like eruption on anogenital region.

Has fixed ideas

#### Natrum mur

Oily, dry, harsh yellow unhealthy skin.

Dry eruptions on margins of hair.

Redness of old scars.

Scars painful.

Emaciation most notable in neck.

#### Bromium

Acne, boils, pustular

Boils on arms and face

Aggravation evening till midnight, sitting in

warm room.

**Kali- iod**

Acne, small boils.

Worse any covering, heat of body intense.

Purple spots worse on legs.

Tendency to oedematous swellings of eyelids, mouth, uvula etc.

**Lycopodium**

Skin thick and indurated.

Violent itching.

Offensive secretions.

Worse warmth.

**Dulcamara**

Eruptions scaly, thick, crusty, moist, bleeding.

Warts large smooth, fleshy, flat.

Pruritis.

Thick crust all over body.

Small furuncle on places hurt.

**Ranunculus bulbosus**

Vesicular and pustular eruption.

Burning and intense itching.

Worse contact

Hard excrescences.

Itching in palms.

Blister like eruption in palms.

**Causticum**

Warts seedy, jagged, bleeding easily ulcerating on tips of fingers, nose, lids, brows.

Itching.

Soreness of folds of skin.

Children slow to walk.

Skin dirty, white, sallow.

Skin prone to intertrigo during dentition.

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