

Homeopathy and Molluscum Contagiosum: Treatment of Pediatric Molluscum Contagiosum with Classical Homeopathic Medicine: A Case Series

Robert J. Signore, DO

Abstract: Molluscum contagiosum (MC) is an infectious viral disease caused by a Molluscipox virus. It produces an eruption of umbilicated papules commonly seen in children. Conventional treatments for molluscum cause pain, blistering, and irritation, as in the case of cantharidin, cryosurgery, and curettage. Treating pediatric molluscum with homeopathic medicine offers many advantages as it does not cause pain or blistering. The pleasant-tasting pellets are easy to administer and have high patient acceptability. Also commonly, other medical issues improve during homeopathic treatment of molluscum. Homeopathic treatment for pediatric molluscum is a viable option for difficult-to-treat areas such as eyelids and genitalia. 21 children were treated in a private dermatology practice with classical homeopathy with the following result: 11 patients (52%) achieved complete clearance of molluscum, 8 patients (38%) had partial clearance, and 2 patients (10%) had no improvement. Fourteen patients (67%) had other medical issues improve during homeopathic treatment. One child with scrotal molluscum had complete clearance with homeopathic treatment.

Keywords: Molluscum contagiosum, classical homeopathic medicine, case series, patient acceptability, ease of administration, difficult to treat, genitalia

Introduction

Molluscum contagiosum (MC) is an infectious viral disease commonly seen in children, sexually-active adults, and immunodeficient individuals. It is caused by the molluscum contagiosum virus (MCV), a Molluscipox virus, which produces an eruption of waxy umbilicated papules. MC is confined to the skin and mucous membranes. Transmission occurs through direct contact with infected hosts or contaminated fomites. The average incubation time is between 2 and 7 weeks with a range extending out to 6 months. Any cutaneous surface may be involved. Rarely, MCV lesions can occur in the mouth or conjunctivae. Children usually acquire molluscum nonsexually at both genital and non-genital areas. MCV in adults commonly affects the groin, genital area, thighs, and lower abdomen and is often acquired sexually.¹ MC is usually a self-limited disease, but it may be protracted in atopic and immunocompromised individuals. Some patients tend to pick and scratch their lesions, which may lead to scarring. Additionally, some schools and daycare centers will not allow children to attend school when visible molluscum papules are present.

Surprisingly, there are no FDA-approved treatments for MC.¹ Cantharidin is an extract from blister beetles which has been used topically to treat patients with MC for over 60 years. However, the use of cantharidin has been restricted owing to its limited availability and lack of formulation standardization.² Other frequently used conventional molluscum treatments include liquid nitrogen cryosurgery, surgical curettage, imiquimod cream, and tretinoin cream. However, these therapeutic agents may cause pain, blistering, irritation, scarring, and pigmentary dyschromia.¹ Despite currently available options, dermatologists and pediatricians who regularly treat molluscum still admit that good treatment options are often lacking. When asked what the ideal molluscum treatment would be like, experts mentioned it would be consistently



effective, painless, free of scarring, and convenient for the children's parents/caregivers.³ I would add that the ideal molluscum therapy would also be safe, inexpensive, readily available, effective for difficult-to-treat areas (e.g., the face, eyelids, genitalia, axillae), and able to heal other seemingly unrelated medical issues in addition to MC. Therefore, clinicians must be vigilant for potentially helpful new (or old) therapeutic agents.

Homeopathy

Classical homeopathic medicine is a system of natural healing that embraces a holistic, natural approach to healing the sick. It treats the person as a whole rather than just focusing on a diseased part or a "labeled" sickness. Homeopathic medicines (known as "remedies") are manufactured from natural sources,

such as plants, minerals, and animals according to the *Homeopathic Pharmacopoeia of the United States* as recognized by the U.S. Food and Drug Administration.⁴ Homeopathic medicine has been reported to be helpful in treating skin diseases, such as MC^{5,6}, hyperhidrosis⁷, acne vulgaris, rosacea, psoriasis, cutaneous t-cell lymphoma, generalized lichen planus, and atopic eczema.^{8,9} For example, the homeopathic use of *Rhus toxicodendron* has also been reported to help prevent or lessen the severity of recurrent allergic contact dermatitis from poison ivy.^{10,11}

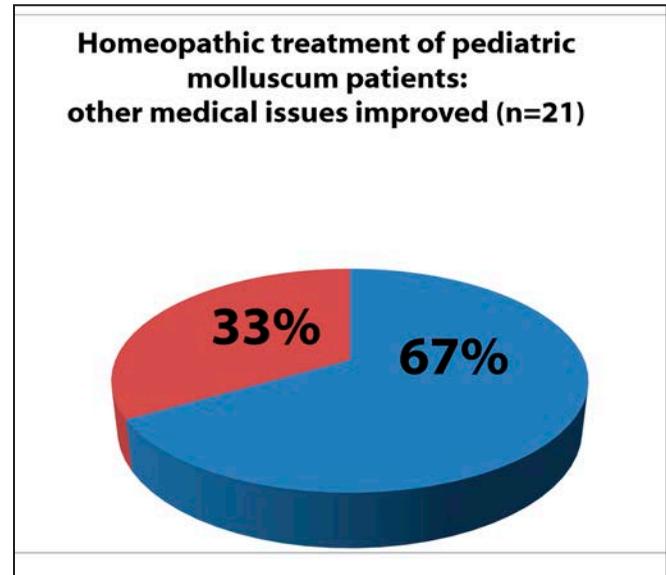
Patients

In this retrospective case series, 23 children were treated in a private dermatology office for MC with classical homeopathic medicine. Two of these patients were lost to follow-up and thus were excluded from the final analysis. 21 children were evaluated by in-person history and physical examination by a dermatologist. The mean age was 7.2 years (range 2.8-5 years). 12 patients (57%) were male and 9 patients (43%) were female. The mean duration of MC infection was 6.5 months (range: 1-24 months). The mean length of homeopathic treatment was 2.43 months (range: 0.75-7.0 months). The mean number of homeopathic remedies prescribed was two remedies per patient (range: 1-6 remedies).

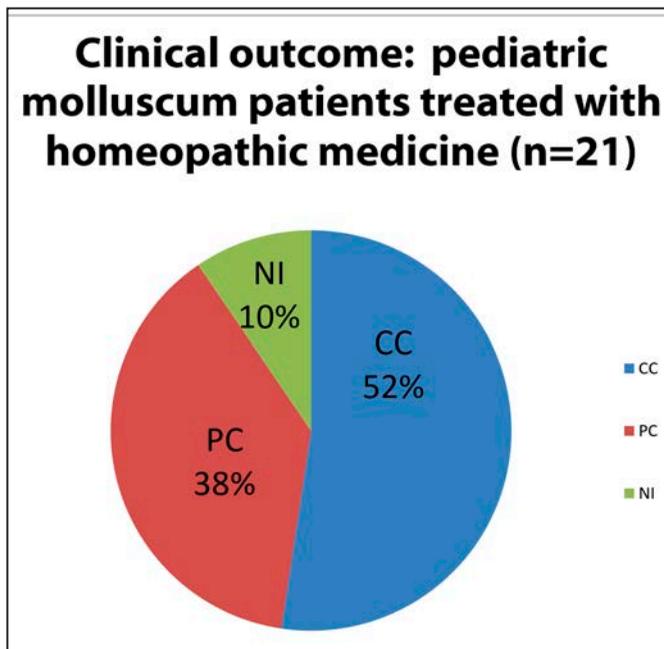
Results

Patients were treated with homeopathic remedies which were selected by the author as the best fitting chronic (constitutional) remedy based on an extensive history-taking procedure and a physical exam. Homeopathic repertorization was performed using Radar10 software. 21 patients were evaluated: 11 patients (52%) achieved complete clearance (CC) of molluscum, 8 patients (38%) had partial clearance (PC), and 2 patients (10%) had no im-

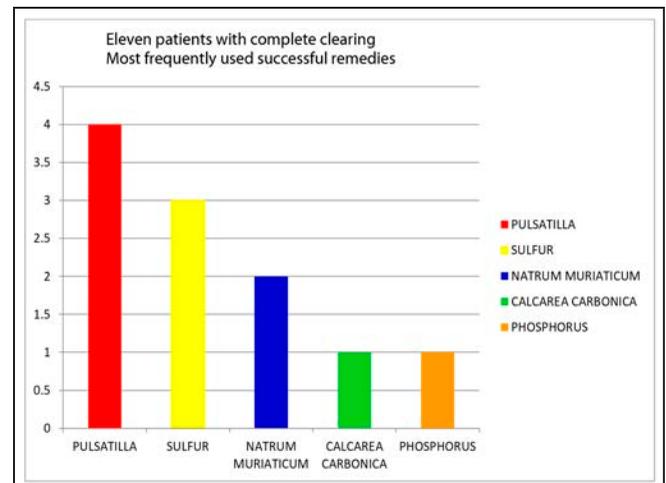
provement (NI) (see Graph 1). 14 patients (67%) had other medical issues which either cleared or improved during homeopathic treatment of MC, viz.: atopic eczema, irritant contact eczema, furuncles, hyperhidrosis (cranial, axillary), bromhidrosis, hyperactivity, anxiety, constipation, loose stools, motion sickness, enuresis, allergic rhinitis, grinding of teeth, insomnia, repetitive movements, fear (of bedtime, expressways), sensitivity to criticism, and easy weeping (see Table 1 and Graph 2). Of the 11 patients achieving *complete clearance*, the most commonly used successful remedies were *Pulsatilla nigricans* (4 patients), *Sulphur* (3 patients), *Na-*



Graph 2



Graph 1: Legend: CC – complete clearing, PC – partial clearing, NI- no improvement



Graph 3: Most frequently used successful medicines for eleven patients with complete clearing of mollusca

trum muriaticum (2 patients), *Calcarea carbonica* (1 patient), and *Phosphorus* (1 patient) (see Graph 3).

One child with scrotal involvement had complete clearance of all MC with his individually-selected constitutional (chronic) homeopathic remedy—*Sulphur*. This is noteworthy as the genitalia,

Other medical issues which improved or cleared completely with homeopathic medical treatment of MD	
Atopic eczema	Motion sickness
Irritant contact dermatitis	Enuresis
Furuncles	Allergic Rhinitis
Hyperhidrosis	Grinding of teeth
Bromhidrosis	Insomnia
Hyperactivity	Repetitive movements
Anxiety	Fear
Constipation	Sensitivity to criticism
Loose stools	Easy weeping

Table 1

Table 2: Indications for remedies used for complete clearance of MC

1. *Pulsatilla*: gentle, mild personality type; initially shy (later becomes more talkative); warm-blooded (worse in warm room); better in fresh air (outdoors, open window); sadness, better with consolation; thirstless, desires creamy food; worse from rich, fatty foods; weep easily/become tearful when painful surgical procedures are discussed.
2. *Sulphur*: warm-blooded; worse with heat; uncover warm feet at night; hyperhidrosis (sweat is warm); desires sweets, cheese, and spicy foods; aversion to eggs; voluptuous itch/scratching; dry, itchy, burning, scaly eruptions; offensive discharges (smells like rotten eggs); worse 11am (hunger) and 2 pm (sleepy); diarrhea 5 am (awakens patient from bed); headache worse with prolonged sleep; orifices are very red (lips, anus).
3. *Natrum muriaticum*: emotionally sensitive; ailments from grief; disappointed love; suppressed anger; suppressed guilt; dwells on past disagreeable occurrences; aversion to company, when alone ameliorates; worse with consolation; weeps when alone; worse sun; desires salt; oily facial skin; warts (tend to be periungual); eczema; herpes simplex.
4. *Calcarea carbonica*: chilly, sweaty head at night and with slight exertion; obese; slow; desires hard or soft boiled eggs, indigestible things, sweets, salt; cold sweaty hands/feet; many fears and anxieties; horrible things/sad stories affect profoundly.
5. *Phosphorus*: tall slender persons of sanguine temperament; delicate eyelashes; quick perceptions; very sensitive nature; desires cold food and drink, juicy refreshing things; aggravation during thunderstorms; amelioration lying on right side; amelioration from being rubbed; amelioration from cold water, and cold food, until it gets warm.

eyelids, face, and axillae are considered difficult-to-treat areas for conventional treatment of MC.

No adverse effects attributable to homeopathic treatment of MC were experienced in this case series. One child reported heart racing and chest pressure after consuming a caffeinated coffee beverage. This was felt to be unrelated to her homeopathic treatment. Of note, no pain, blistering, or irritation was noted by our patients or their parents. This is an important observation as pain, vesiculation, and dermatitis are commonly seen or experienced with conventional MC treatments such as curettage, cryotherapy, topical cantharidin, and topical tretinoin.³

Conclusion

In our dermatology office-based retrospective case series of 21 molluscum contagiosum patients, we found that 52% of children treated with classical homeopathic medicine achieved complete clearing of all molluscum. 38% of children achieved partial clearing of molluscum. 67% of children experienced improvement or resolution of other medical issues during homeopathic treatment of their molluscum contagiosum, which is an added advantage when treating molluscum patients with homeopathic medicine. Classical homeopathic medicine also appears to be a viable option for difficult-to-treat anatomical sites, such as the genitalia. A comparison study of classical homeopathic medical treatment of

MC versus conventional treatment is indicated.

Sources of Support: None

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About the author: Robert J Signore, DO, is a board-certified dermatologist who has been practicing in the Chicago area for 29 years. Prior to training in dermatology, he completed a family practice residency. He received his DiHom from the British Institute of Homeopathy (USA) in 2009 and has implemented classical homeopathic medicine in his practice to treat patients with skin diseases. You can contact Dr. Signore at (708) 429-2992 or by email at tinleyderm@gmail.com.

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