

A CASE OF MOLLUSCUM CONTAGIOSUM

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ABSTRACT

Molluscum contagiosum is a common cutaneous viral infection primarily affecting children, though it can also present as a sexually transmitted disease in adults. This report presents a case of a 3.5-year-old male with multiple dome-shaped papular eruptions across various body regions. Diagnosis was confirmed based on characteristic morphology. The treatment strategy included homeopathic remedies, beginning with *Calcarea Phosphorica*, followed by *Tuberculinum*. This case highlights the effectiveness of individualized homeopathic treatment for molluscum contagiosum.

Keywords: Molluscum contagiosum, homoeopathy, anti-miasmatic prescription

ABBREVIATIONS: DNA- Deoxyribonucleic acid, HIV- Human Immunodeficiency Virus, OPD – Outpatient Department, pt – Patient, NAD – No Abnormality Detected, SQ – Status Quo

1. INTRODUCTION

This is a common viral skin infection caused by molluscum virus, a DNA virus of the pox group, mostly seen in children. In adults, it can occur occasionally through sexual transmission. Young children usually get this infection through skin to skin contact while playing (1).

Morphology:

A classic lesion appears as smooth, shiny, pearly white or yellowish dome shaped papule with a central umbilication. Early lesions don't have central umbilication and yellow cheesy material can be expressed from the centre of a fully developed lesion (1).

Distribution:

In children, face, extremities (exposed sites) and trunk are most commonly affected in that order. Sexually acquired infections affect the male/female genital and perigenital areas. If the infection is widespread, HIV has to be ruled out. Lesions often cluster in one area due to spreading of infection by autoinoculation (1).

Diagnosis:

Diagnosis is usually by clinical examination.

Treatment:

This is done by removing lesions with a sharp instrument like small curette or tiny forceps or hypodermic needle under topical anaesthesia with EMLA. Cryotherapy is another option available (1).

CASE REPORT

A 3.5year old male pre-schooler patient from M came to the OPD with complaints of multiple small popular, dome shaped eruptions on arms, face, neck, trunk, legs, groins, since 1 year. Itching present 1+. The eruptions came on left side then on right side. No modalities/ concomitants were found.

HISTORY OF PRESENTING COMPLAINTS: The onset of eruption was gradual in duration of 1 year. No any associated complaints.

PAST HISTORY: Allergy to insect bite at 9 months of age.

FAMILY HISTORY: Mother – Nothing specific, Father - Migraine

PERSONAL HISTORY:

Appearance: Lean, wheatish complexion

Appetite: Good, Eats both Veg./ Non-Veg food

Thirst: Profuse, half glass of water at a time at small intervals, cold water

Likes: Dal, rice, chapati, sweets 2+

Perspiration: Profuse on neck, head, offensive.

Stool: Normal, 3-4 times/day, no straining.

Sleep: 8-9 hours, refreshing, talks in sleep, sleeps on left side

Thermals: Hot patient.

Dreams: Nothing Specific, occasionally of cars

BIRTH HISTORY AND MILESTONES: The child was born through normal full term delivery, weighing 2.8 kg. Teething began at 2 years old, talking started at 3-4 months, and walking began at 9 months.

Vaccination: Done.

MIND:

Active even during illness like fever. Moody, rejects what he doesn't like. **Pt likes travelling**, swimming, running, drawing. He also likes cars. Pt wants colourful clothes. He shouts in anger, has **fear of insects**, can stay alone and **wants attention**.

INVESTIGATIONS: - Diagnosis was based on presence of characteristic morphology.

GENERAL EXAMINATION: Temperature: Afebrile, Pulse = 88 beats per minute, Respiratory Rate = 20 respirations/minute Height: 99 cm Weight: 12 kg. General Examination – Nothing specific

SYSTEMIC EXAMINATION: Respiratory System – AEBE clear, Nose – NAD, Throat - NAD

Cardiovascular System. – S1S2 heard, Central Nervous System- conscious, oriented,

Per Abdomen – Soft Non-Tender, Non-Distended, Bowel sounds heard

Local Examination: Multiple small papular, dome shaped lesions on Arms, Face, Neck, Trunk, Legs, Arms, Groins

DIAGNOSIS: MOLLUSCUM CONTAGIOSUM (ICD 11: 1E76)

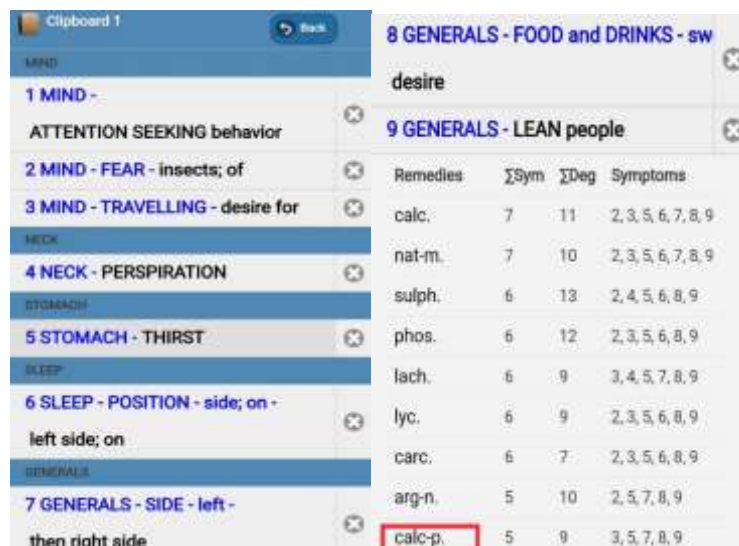
TOTALITY:

Fear of insects, likes to travel, want of attention, perspiration on neck, thirst for small quantities frequently, desire for sweets, sleeping on left side, complaints going from left side to right, lean built.

2. ANALYSIS AND EVALUATION OF SYMPTOMS

SYMPTOMS	ANALYSIS	EVALUATION
Fear of insects	Mental general	3+
Likes to travel	Mental general	3+
Want of attention	Mental general	3+
Perspiration on neck	Physical general	3+
Thirst for small quantities frequently	Physical general	3+
Desire for sweets	Physical general	2+
Sleeping on left side	Physical general	3+
Complaints going from left side to right	Physical general	3+
Lean built.	Physical general	3+

REPERTORIZATION:



Remedies	ΣSym	ΣDeg	Symptoms
calc.	7	11	2, 3, 5, 6, 7, 8, 9
nat-m.	7	10	2, 3, 5, 6, 7, 8, 9
sulph.	6	13	2, 4, 5, 6, 8, 9
phos.	6	12	2, 3, 5, 6, 8, 9
lach.	6	9	3, 4, 5, 7, 8, 9
lyc.	6	9	2, 3, 5, 6, 8, 9
carc.	6	7	2, 3, 5, 6, 8, 9
arg-n.	5	10	2, 5, 7, 8, 9
calc-p.	5	9	3, 5, 7, 8, 9

FIRST PRESCRIPTION: Calc. Phos 200 3 Doses, SL 200 tds * 2 weeks

FOLLOW UP:

Date	Complaints	Rx
05/10/2023	Eruptions on face, neck, groin, legs size -SQ-, Number of eruptions -SQ- Itching -SQ- No new eruptions Appetite reduced Weight – 12.5 kg Complaints were not improving; hence anti-miasmatic medicine was given.	Tub. 1M 3 Doses SL 200 tds * 2 weeks
27/10/2023	Eruptions on face, neck, trunk, legs > 30% Number of eruptions >> Itching -SQ- No new eruptions Appetite has improved. Weight – 13.5 kg, Height – 99 cm	Calc. Phos. 1M 3 Doses SL 200 tds * 2 weeks
23/11/2023	Eruptions on face, neck, trunk, legs >> No new eruption Previous eruptions are dying. Itching < Coryza < for 1 week, cough with yellow expectoration at night, running nose. No H/O Fever, sneezing. H/O consumption of milk at night and A/F eating cold things. Generals – Normal In General, >>40 %	Hepar Sulph 200 tds * 1 ST week Calc. Phos. 1M 3 Doses SL 200 tds * 2 nd week
21/12/2023	Eruptions on face, neck, trunk, legs >> No new eruption Previous eruptions are dying. Itching >> No coryza and running nose. Generals – Normal	Calc. Phos. 10 M 3 Doses SL 200 tds * 2 weeks
02/03/2024	Eruptions in groin region + Red, round lesion Itching +, no burning Eruption on face & itching -0- Weight – 14.5 kg, Height – 102 cm	Calc. Phos. 10 M 3 Doses SL 200 tds * 2 weeks
06/05/2024	Eruptions in groin region -0- No itching Eruption on face -0- Appetite reduced occasionally since 1 month Weight – 15 kg, Height – 102 cm Pt is still under treatment	SL 10 M 3 Doses SL 200 tds * 30 Days

CASE SUMMARY: From the above, we can see child had fear of insects, likes to travel, want of attention, perspiration on neck, thirst for small quantities frequently, desire for sweets, sleeping on left side, complaints going from left side to right, lean built. Calc carb came first in repertorization by using Synthesis Repetory. If we refer Boericke Materia Medica, Calc carb is apprehensive, averse to work or exertion (2). On the other hand, Calc Phos always want to go somewhere (3) and has more marked desire for travelling (4). Hence Calc phos 200 was given after differentiating with Calc carb. When 200th potency failed to give further results and complaints were not improving, Tuberculinum 1 M was given as anti-miasmatic medicine. After this, Calc. Phos 1M potency was used considering the susceptibility of the patient. When Calc. Phos.1M potency failed to give further results, Calc. Phos. 10 M was used.

BEFORE



AFTER

3. CONCLUSION

This case of molluscum contagiosum demonstrates the effectiveness of a tailored homeopathic approach in managing viral skin infections. The progressive improvement in lesions and overall patient well-being underscores the importance of symptom-based remedy selection. Calcarea Phosphorica, in varying potencies, played a pivotal role in resolving the condition, with Tuberculinum providing essential support when needed. While recurrence is common in molluscum contagiosum, this case suggests that homeopathy can offer a sustainable treatment option, potentially reducing recurrence rates and improving patient quality of life. Further studies are recommended to explore its broader applicability in dermatological viral infections.

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4. BIBLIOGRAPHY

- [1] Khopkar DU. Skin Diseases & Sexually Transmitted Infections With MCQs. 6th ed. Khopkar DU, editor. Navi Mumbai: BHALANI PUBLISHERS; 2015.
- [2] BOERICKE W. BOERICKE'S NEW MANUAL Of HOMEOPATHIC MATERIA MEDICA With REPERTORY Including Indian Drugs, Nosodes, Uncommon Rare Remedies, Mother Tinctures, Relationships, Sides of the Body, Drug Affinities & List of Abbreviations. Third Revised & Augmented Edition Based on Ninth Edition ed. BOERICKE W, editor. New Delhi: B. JAIN PUBLISHERS (P) LTD.; 2016.
- [3] BOERICKE W. BOERICKE'S NEW MANUAL Of HOMEOPATHIC MATERIA MEDICA With REPERTORY Including Indian Drugs Nosodes, Uncommon Rare Remedies, Mother Tinctures, Relationships, Sides of the Body, Drug Affinities & List of Abbreviations. Third Revised & Augmented Edition Based on Ninth Edition ed. BOERICKE W, editor. New Delhi: B. JAIN PUBLISHERS (P) LTD.; 2016.
- [4] J.T.Kent. REPERTORY OF THE HOMEOPATHIC MATERIA MEDICA. ENRICHED INDIAN EDITION REPRINTED FROM SIXTH AMERICAN EDITION ed. Clara Louise Kent MD, editor. New Delhi: B. JAIN PUBLISHERS (P) LTD.; 2010.}