



Children's Medical Office

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Warts and Molluscum by Elisabeth Winterkorn, M.D

Molluscum and Warts are common skin rashes that are caused by viruses. The rashes are harmless and will resolve on their own over time – though it could take months or years!

Molluscum (muh-luhs-kum) contagiosum (kən-tā-jē-ō-səm) looks like pearly- or flesh-colored bumps on the skin. These bumps can appear anywhere and often occur clusters of 10-20, but there can be many more.

Common warts are often skin-colored and feel rough, but they can be dark (brown or gray-black), flat, and smooth.

Because these conditions are both caused by viruses, they can be shared on towels and clothing. Wrestlers and gymnasts may get it from touching infected mats. Skin-to-skin contact also spreads the virus. Molluscum is also spread from one spot to another by scratching the skin.

TREATMENT

Molluscum: we primarily advise you to leave them alone and observe them untreated.

However, if the molluscum is more problematic, your provider may choose to prescribe either Imiquimod (Aldara), or RetinA. These are creams that are applied to the affected areas at bedtime three nights a week. Once the area begins to appear red and irritated, the cream is stopped. Treatment can be restarted in 1 month if the areas are not completely improved.

And in some cases we will refer you to see a dermatologist to consider treatment with Cantharidin, AKA “Beetle Juice,” a chemical irritant applied to the skin to promote resolution of the lesions.

Warts: In many cases these also resolve without treatment and can be observed. If the warts are causing discomfort, however, they can be treated. We commonly recommend initially treatment with over-the-counter with salicylic acid solution. This needs to be done every night for at least 30-90days and sometimes longer.



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OVER-THE-COUNTER WART TREATMENT PROCEDURE:

- Go to a hardware store and buy a small sheet of #100-grain sandpaper (a pumice stone will work)
- Buy a bottle of generic or brand-name liquid Salicylic acid 17% solution from the pharmacy – no prescription is required. (DO NOT buy pre-medicated pads/band-aids or over-the counter freezing solutions as these do not work as well).
- Each night after bath and before bed, sand down the warts gently for about 5-10 seconds each.
- Apply a dab of the liquid salicylic acid solution to each wart.
- Cover the wart with a small piece of duct tape and leave on overnight
- REPEAT nightly until the wart is resolved. For warts on the soles of the feet, the wart will often fall out like a plug with a shallow hole remaining. If you see a dark black spot at the bottom that looks like dirt or a splinter that is the root. Continue the treatment until the root is gone, otherwise the wart will re-grow.
* if you develop irritation from the sandpaper or salicylic acid, then discontinue using it for a week or two and then try again. If the irritation comes back, stop completely and come in for evaluation. Do continue to use the nightly duct tape while waiting for the redness to resolve.

IN OFFICE - LIQUID NITROGEN TREATMENT FOR WARTS:

This can cause some initial pain and burning as the surface of the skin is being temporarily frozen. The sensation of stinging and burning usually lasts less than 30 minutes, although on the palms and soles it may be sore for several days. You can use acetaminophen or ibuprofen as needed for pain relief.

At first the area will be red and puffy and may have blistering. Over a few days-weeks the area will become hard and crusted and should fall off. It should be gone after 3 weeks and the underlying skin should be flat and smooth.

If pain or swelling lasts or increases after 2-3 days, please return to the office for evaluation. Please leave any blistering alone, do not try to drain or remove it. Also, do not remove any scabs; this may cause more trauma and scarring. You may apply Vaseline or Aquaphor to help soothe the healing areas.

OTHER WART TREATMENTS INCLUDE:

Tagamet – a prescription anti-reflux medication that has the side effect of reducing warts. It is taken by mouth twice daily for 3 months.

RetinA or Imiquimod – see prior section on Molluscum treatment.