No effective interventions for molluscum contagiosum

Clinical Question	How effective are different interventions for cutaneous, non- genital molluscum contagiosum in people without immune deficiency?
Bottom Line	There was moderate-quality evidence that topical 5% imiquimod was probably no more effective than vehicle in achieving short-, medium-, and long-term clinical cure. High-quality evidence showed that topical 5% imiquimod was no better than placebo at improving molluscum contagiosum up to three months after the start of treatment. High-quality evidence showed that 5% imiquimod differed little or not at all in the number of side effects compared to vehicle. However, moderate-quality evidence suggested that there were probably more application site reactions when using topical 5% imiquimod compared with vehicle. Other non-effective interventions included cryospray, 10% potassium hydroxide; 10% Australian lemon myrtle oil, olive oil, 10% benzoyl peroxide cream, 0.05% tretinoin; 5% salicylic acid, 5% sodium nitrite co-applied with 5% salicylic acid, iodine, tea tree oil, homeopathic calcarea carbonica ,10% povidone iodine solution and 50% salicylic acid plaster. Follow-up duration ranged from three to 28 weeks after randomisation.
Caveat	Overall, study limitations included lack of blinding, many dropouts, and no intention-to-treat analysis. Small study sizes resulted in broad confidence intervals and may have led to important differences being missed. Many common treatments, such as physical destruction have not been adequately evaluated.
Context	Molluscum contagiosum in healthy people is a self-limiting, relatively harmless viral skin infection. It mainly affects children and adolescents. It usually resolves within months in people without immune deficiency, but treatment may be preferred for social and cosmetic reasons or to avoid spreading the infection. A clear evidence base supporting the various treatments is lacking.
Cochrane Systematic Review	van der Wouden JC et al. Interventions for cutaneous molluscum contagiosum. Cochrane Reviews, 2017, Issue 5. Art. No.: CD004767.DOI: 10.1002/14651858. CD004767.pub4. This review contains 22 studies involving 1,650 participants.

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