

## GRISEOFULVIN F.P. THERAPY IN MOLLUSCUM CONTAGIOSUM

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### Summary

Three cases of *Molluscum contagiosum* treated with Griseofulvin F.P. therapy have been described. The drug was found effective and without any toxicity.

*Molluscum contagiosum* is of viral aetiology for which no satisfactory systemic therapy is available so far. Systemic antibiotics are not effective<sup>1</sup>. Kapur<sup>2</sup> reported a case of *molluscum contagiosum* treated successfully with griseofulvin F. P. Three more cases have been treated with the same drug and these are presented.

### Case Reports

#### Case No. 1

A male child of 5 years reported with lesions of *molluscum contagiosum*. They subsided with 62.5 mg of griseofulvin twice a day for 14 days. (Total 1.750 G)

#### Case No. 2

A male child of 6 years with lesions of *molluscum contagiosum* was put on griseofulvin therapy. The lesions cleared within 3 weeks with a dosage of 62.5mg twice a day (Total 2.625 G).

#### Case No. 3

An adult male was admitted on July '75 with multiple lesions of *molluscum contagiosum* on the back for 12 months (Fig. 1 Page No. 300). He was given

griseofulvin F. P. 250 mg three times a day for 50 days. The dose was reduced to 250 mg twice a day when improvement was noticed. It was discontinued after another 5 weeks though two lesions remained with partial healing only (Fig. 2 Page No. 300). A total of 54G of griseofulvin F.P. was given.

### Morphological changes

There was no improvement clinically for about 7 days and thereafter the lesions started regressing gradually. They became erythematous initially and this was followed by an erythematous small areola within 48 to 72 hours. One to three lesions showed such morphological changes at a time. Patients did not complain of pruritus, burning or pain. Lesions regressed in size and erythema subsided within 7 days leaving residual hyperpigmented macules. The process went on till all the lesions subsided. New lesions did not appear after griseofulvin therapy was started. There was no relapse.

### Discussion

*Molluscum contagiosum* is conventionally treated with local therapy and relapse may occur<sup>1</sup>. Mulay et al<sup>3</sup> and Sehgal<sup>4</sup> reported good results with Griseofulvin in Herpes Zoster and Lichen planus and Herpes proenitalis

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respectively. Kapur and Singh (under publication) observed good results with Griseofulvin in various types of warts.

Griseofulvin tends to concentrate more in the infected epidermis than in normal<sup>5</sup>. It appears that Griseofulvin also has an antiviral effect. Its action may be by interfering with nucleic acid synthesis thus resulting in the inhibition of the viral growth<sup>1,3,4</sup>.

Griseofulvin has given good results in these 3 cases of molluscum contagiosum without any toxic results or occurrence of relapse. A total dose of 50 - 55 G of Griseofulvin is worth trying in adults.

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