

Hemangioma

A hemangioma (hee man jee OH mah) is a common vascular birthmark, made of extra blood vessels in the skin. It is a benign (non-cancerous) growth. The exact cause is not known. Hemangiomas are typically not inherited, but others in the family may also have had them.

Hemangiomas are more common in girls than in boys. They are more common in premature infants, twins and Caucasian children. Most hemangiomas go through several phases of growth. Then, they start to go away by themselves.

1. Most appear during the first weeks of life and grow fast for the first 2 to 3 months.
2. For the next 3 to 4 months, the hemangioma may grow more slowly.
3. Then, there is usually a period of no change to the hemangioma.
4. At around 1 year of age, the hemangioma begins to slowly shrink and fade in color. This happens over the next 1 to 10 years. Many go away completely during this time. By the time a child is 5 years old, half of all hemangiomas will be flat and lighter in color. By age 10, many are gone or only faintly visible.

Some hemangiomas leave behind soft, wrinkly skin in areas that were previously stretched out by the hemangioma. Others may leave behind the appearance of superficial (surface) blood vessels. If left over skin changes are noticeable there are procedures that may be used when the child is older to correct the changes. These include surgery and laser treatments.

Types of hemangiomas

Hemangiomas may occur anywhere on the body. Some children may have more than one. There are three main types:

- **Superficial** (on the surface of the skin): These look flat at first, and then become bright red with a raised, uneven surface.
- **Deep** (under the skin): These appear as a bluish-purple swelling with a smooth surface.
- **Mixed**: These hemangiomas have both superficial and deep components.

Diagnosis

The doctor can usually look at your child's skin and tell if there is a hemangioma. If the diagnosis is not clear, an ultrasound scan or MRI test may be needed.

When treatment is needed

The hemangioma may need to be treated if:

- The skin “breaks down” and an open sore forms.
- It gets infected (especially if it is in the diaper area).
- It causes problems with any of the following:
 - vision
 - hearing
 - diaper changes
 - breathing
 - eating
- It is very large or it is a cosmetic concern, such as on the face.

Treatment

Most hemangiomas go away over time without any treatment. If the hemangioma is causing a problem, there are different treatment options. Your child’s doctor will talk with you about the best choice for your child. This may depend on the size, location and behavior of your child’s hemangioma. Treatments may include:

- **Topical medicine** (on the skin rubbed onto the hemangioma).
 - Topical beta blockers: These may help lighten the hemangioma and slow its growth. This works best on smaller, superficial hemangiomas.
 - Topical antibiotic: These are applied when there are open sores with concern for infection.
- **Oral medicine** (taken by mouth). Your child will be watched closely for side effects if taking oral medicine. He or she may need tests before starting.
 - Propranolol is now the first-line treatment option for concerning hemangiomas. (See Helping Hand HH-V-267, *Propranolol for Hemangiomas*.)
 - Prednisone is used in select cases that may be resistant to other treatment, or if propranolol cannot be used.
- **Surgery** to remove the growth: This may be considered once the hemangioma has stopped growing or other treatments have failed. Surgery may be used to remove markings left over from hemangiomas.
- **Laser:** This may lighten the appearance of blood vessels left over from hemangiomas.

When to call the doctor

Call your child's doctor right away if the area looks infected. These are symptoms of infection:

- pus
- fever over 101 degrees Fahrenheit (taken under the arm)
- redness
- skin looks open or oozes
- pain
- skin breaks down (ulcerates)

Call your child's doctor if you have concerns about a hemangioma medicine, such as:

- You run out of the prescribed oral medicine.
- Your child refuses to take the medicine.
- You are concerned about possible side effects from the medicine. If your child is:
 - drowsy
 - wheezing or having noisy breathing
 - fussy
 - feverish and ill while on the oral medicine.
 - not eating well

If your child is on oral steroids, **the medicine must never be stopped suddenly**. Be sure to get the prescription filled before your child takes the last dose. The doctor will give you exact instructions on how to slowly stop the medicine when it is time to do so.

Follow-up appointments

The doctor needs to watch your child's progress. It is important to keep follow-up appointments.

More information

You can get more information on hemangiomas at www.birthmark.org.