What is a Hemangioma?

How often do hemangiomas occur?
- Hemangiomas are the most common tumors of infancy occurring in up to 10% of infants
- May be present at birth; most often appear in the first several months of life
- More common in females, premature babies, and white infants

What causes a hemangioma?
- The cause is not clear

What do hemangiomas look like?
- A strawberry hemangioma is a raised, reddish purplish skin lesion of varying size
- Hemangiomas usually grow during the first year of life and then go away over time, often becoming invisible by age 10

How is a hemangioma diagnosed?
- Diagnosed based on appearance
- Diagnostic tests aren’t usually needed
- May require imaging studies (MRI) or biopsy

Does a hemangioma cause complications?
- Usually hemangiomas are uncomplicated
- Occasionally, a hemangioma can break down and cause a sore with pain, bleeding, scarring, or infection
- Based on where they are located, hemangiomas can interfere with vision, breathing, hearing, or going to the bathroom, but this is rare

How are hemangiomas treated?
- Most hemangiomas do not need treatment
- If the growth causes vision or other problems, there are medications available.
  - **Propranolol** – this beta blocker drug taken by mouth is well tolerated and effective for treatment of hemangiomas. Side effects may include low blood sugar, low blood pressure, and wheezing. Propranolol is considered the first line treatment for hemangiomas. Treatment for as long as 1-1.5 years may be needed. Regular follow-up with HVLM Clinic for evaluation of treatment and response is important.
  - **Corticosteroids** – for children who do not respond to the beta blocker drug propranolol. These drugs are taken by mouth or injected directly into the hemangioma.
- Some hemangiomas may be surgically removed or need laser ablation because they block the airway or vision or cause cosmetic, social or psychological problems