

Infantile Hemangiomas

What is an infantile hemangioma? Hemangiomas are growths of extra blood vessel cells in the skin. Infantile hemangiomas are the most common non-cancerous tumor in children. A vascular tumor involves the blood vessels. This occurs in about 3-10% of all infants. Infantile hemangiomas usually grow very quickly in the beginning and then they stop growing and start to slowly shrink.

When and where do infantile hemangiomas appear? You usually cannot see them at birth. They usually appear one to four weeks after birth. They may occur anywhere on the skin surface. They are most commonly seen on the scalp, face and neck. Many start to appear as a small bruise, scratch, or a tiny red bump. Unlike other types of birthmarks, they will grow and change quickly during your child's first few months of life.

What do hemangiomas look like? Hemangiomas may look different depending upon how deep they are in the skin. Hemangiomas that are closer to the top of the skin tend to be bright red and raised, with an uneven surface. Deeper hemangiomas tend to be smooth on the surface, and may be skin-colored or blue in color. Hemangiomas that extend deep from the skin to the top of the skin are called mixed hemangiomas.

What causes an infantile hemangioma? We do not know what causes infantile hemangiomas. Hemangiomas are not caused by anything you did or did not do during pregnancy. They are more commonly seen in:

- Girls rather than boys
- Caucasian children
- Babies born very small, or born several weeks before their due date
- With multiple births (twins/triplets)

Will my baby's hemangioma grow? Infantile hemangiomas usually grow fastest in the first 2-4 months of life. They stop growing by about 8 months of age. They usually begin to shrink around 1 year of age. As the hemangioma shrinks, the color may change from red to purple to gray and it may become softer and flatter. It may take several years for the hemangioma to go away completely. It can take up to 10 years. Larger hemangiomas may take a longer time to go away and have a greater chance of scarring.

What problems or complications can infantile hemangiomas cause?

Most hemangiomas do not cause any problems and will go away on their own over time. Some hemangiomas can cause concerns, depending on the size and location. Some may cause problems with eating, vision, hearing, or breathing. Treatment is usually needed when the hemangioma is around the eye, near the mouth, nose, ears, or diaper area. There can also be concerns about long-term appearance outcomes, especially for hemangiomas on the face. Complications of hemangiomas include:

- **Ulceration:** The skin over the hemangioma can break down, making the skin appear raw and shiny and a scab or crust may form. Ulcerations can be very painful for your child. This pain may cause irritability, poor feeding, and difficulty sleeping. Ulceration also increases the risk of infection and scarring. Hemangiomas that are located around the mouth, nose, ear, or the skin under the diaper area are at greater chance of ulceration.
- **Bleeding:** Many parents worry about hemangiomas “bursting” and bleeding. They usually only bleed if there is an ulceration. When a hemangioma is cut or injured, it can bleed, or form a crust or scab. When hemangiomas do bleed, they tend to bleed a lot. However, the bleeding should only last for a short time. You can stop the bleeding by applying gentle pressure to the area for 15 minutes. If the bleeding returns, or does not stop with pressure, you should call your child’s doctor.

Do hemangiomas hurt? Most hemangiomas do not hurt, unless there is an ulceration.

Will hemangiomas leave a scar? The final appearance of a hemangioma is different from person to person. It will depend on the size of the hemangioma, the location, and whether the hemangioma became ulcerated or infected. Areas where the skin does not easily stretch are more likely to scar. These areas include the nose, lip, forehead, and ear.

Sometimes extra skin remains in these areas after the hemangioma has become smaller. Once the hemangioma has stopped getting smaller, a plastic surgeon may remove the extra skin. If any remaining skin is discolored, laser therapy may help.

Do hemangiomas occur anywhere besides on the skin? Although very uncommon, hemangiomas may happen on the organs inside our body, this is known as an internal hemangioma. These organs may include the liver, stomach, or intestines. The chance of having an internal hemangioma is larger if your child has more than 5 skin hemangiomas. Hemangiomas may also occur in the throat and block the airway. During your child’s physical exam, your doctor will determine if your child is at risk of having internal hemangiomas. If your child is at risk, more studies or other procedures may need to be completed.

How are hemangiomas diagnosed? Hemangiomas are usually diagnosed by patient history and physical examination. More testing is usually not needed. With deep hemangiomas, special pictures, such as ultrasound or magnetic resonance imaging (MRI), may be done.

How are hemangiomas treated? In general, infantile hemangiomas will get smaller over time, and most will disappear completely on their own. Most will not require any treatment. Some hemangiomas do require treatment.

Whether to treat a hemangioma or not depends on many factors, including:

- Age of the child
- Size of the hemangioma
- Where the hemangioma is located on the body
- How fast the hemangioma is growing
- If there is an ulceration, or there is risk of ulceration

Hemangiomas located in the airway, near the ear canal or eyes, and on the nose or face, are treated more quickly than other hemangiomas.

Treatment options for infantile hemangiomas include:

- Watching the hemangioma for some time
- Medicines that may be taken by mouth or applied to the hemangioma
- Surgery to remove the hemangioma
- Laser therapy
- Wound care (for ulcerated hemangiomas)

Are my future children at risk? More research is needed to understand the risk of having a second child with a hemangioma.