

Haemangiomas are made of tiny blood vessels and usually occur in or just underneath the skin. Rarely, they may be multiple and extremely rarely, they may occur in internal organs.

Haemangiomas are usually not present at birth although there may be a small red mark at the site. They generally develop in the first few weeks of life. After this they grow rapidly for a number of months, before stabilizing, and then they slowly go away. They have usually reached their maximal size by between 6 and 9 months of age.

### **Why has our baby got a haemangioma?**

No one fully understands why haemangiomas occur. Up to 4% of babies have a haemangioma and they are more common in girls and more common if the baby is premature. There is no known genetic or inherited reason for them, and there is no known toxic or infective cause. They are not related to anything the mother may or may not have done during pregnancy.

### **Will the haemangioma go away?**

Most haemangiomas resolve completely or almost completely on their own. Sometimes, once the haemangioma is gone, the skin in the area will appear slightly thin or pale, and sometimes there is some residual minor thickening of the underlying tissues.

### **How long will it take to go away?**

Haemangiomas resolve over a longer period of time than they take to grow. Half have gone by the age of 5 and most by the age of 9. Any part of the haemangioma that is still there at 10, will probably not resolve.

### **Which haemangiomas need investigations or treatment?**

Most haemangiomas require no therapy at all and go away completely. In most children, natural resolution of the haemangioma results in the best cosmetic result.

Some haemangiomas, however, do require treatment before maximal resolution has taken place. Close monitoring, especially in the first few weeks and months of life, is essential to determine which haemangiomas may require treatment. Most problems will become apparent during this time.

- Haemangiomas that could potentially interfere with sight, feeding or breathing, such as those adjacent to the eye, nose, mouth or airway may require treatment.
- Haemangiomas occasionally ulcerate (lose the overlying skin) or bleed, making them painful and open to infection. This may require treatment.
- Some haemangiomas are in particularly conspicuous places, such as on the tip of the nose, or on the forehead. They may warrant treatment for 'psychosocial' reasons, usually prior to starting school.
- A child with a haemangioma that hasn't completely gone away or has left a residual lump or stretched skin, may benefit from treatment.
- Large segmental haemangiomas may be associated with other problems and so investigations of other organs may be needed.
- If there are more than 5 haemangiomas some further investigations may be needed.

### **What investigations and treatments may be required?**

Most haemangiomas require no special tests or treatments. Your doctor will advise you if any are needed. Possible investigations include blood tests, special X rays, and scans.

Treatment may include medications, dressings, physiotherapy, Laser, embolisation (an injection to block the blood flow), an operation, or a combination of these. A new medication is now being trialled in a study.

### **How will my child be monitored?**

No haemangioma is exactly the same as another. The management must be tailored to its size and site and any associated potential problems. The *Sydney Children's Vascular Birthmarks Clinic* provides the combined expertise of medical and allied health specialist to do this. It will be recommended that your child be seen regularly, at the clinic or by your doctor, until the haemangioma resolves, or until it is clear that treatment is required.

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Please consult with your doctor or health professional to make sure this information is correct for your child.

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### **What other support is available?**

It is often difficult for parents to deal with their own responses to their child's condition, in addition to the responses of other people. The Vascular Birthmarks Team's social worker is available to discuss this and other issues with you, as well as to help ensure any questions you may have of the specialists, are answered.

### **Remember**

Most haemangiomas go away without the need for treatment. The aim of the *Vascular Birthmarks Clinic* is to provide your child with optimum care to ensure the best possible outcome.

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