Beard Hemangiomas and their Associated Anomalies

INTRODUCTION

Segmental (or "diffused") hemangiomas are large, broad based lesions. Conventional therapy for hemangiomas include steroids, propranolol, and oral phenoxybenzamine. To date, no therapy has proven effective for "diffused" hemangiomas, and these lesions often require repeated surgical intervention. Baby's face hemangiomas may involve multiple organs (or systems) and may be associated with other congenital abnormalities.

RESULTS

From 2004-2006, eleven patients presented to the Vascular and Mucosal Malformations Center for evaluation and management of hemangiomas in a board distribution.

PRESENTATION SYMPTOMS AND PHYSICAL EXAM

With the exception of one patient who was treated with propranolol, all other patients responded to the medical therapy with a reduction in hemangioma size. A multidisciplinary approach is necessary in patients with "diffused" segmental hemangiomas. The goal of therapy is to reduce the size of the hemangioma, to improve function, and to prevent complications (see Table 1).

MANAGEMENT

Wean Vincristine to Hemangioma response (0.05 mg/kg/wk) if surgery not an option.

CONCLUSIONS

A multidisciplinary approach is necessary in patients with segmental hemangiomas. Formal neurological, cardiac, great vessel, ophthalmology, and surgical evaluations and management should be performed due to the frequent occurrence of 100% incidence of abnormal ontogeny. Preventative and proactive surgical and medical evaluations and management should be in the majority of the patient population. Systemic therapy with steroids and Vincristine can arrest progression of hemangiomas with minimal side effects.

REFERENCES


Department of Otolaryngology–Head and Neck Surgery, Department of Pediatric Hematology and Oncology, Department of Plastic Surgery, Hemangioma and Vascular Malformations Center, Cincinnati Children’s Hospital Medical Center, Cincinnati, OH.