Role of Propranolol in Management of Difficult and Complicated Hemangioma

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Abstract:

Abstract Background: Difficult and problematic hemangiomas need early management to stop growth and prevent or reduce functional and aesthetic deformities. Because of rapid growth, complication and/or location of infantile hemangioma, approximately one in ten require treatment. Oral propranolol is an exceptionally encouraging treatment for problematic infantile hemangiomas. The main purpose of this paper is to evaluate the adequacy of propranolol as a first line treatment for difficult and complicated infantile hemangioma. Patients and methods: Sixty-four infants, mean age 3.5 months, with rapidly proliferating difficult and complicated infantile hemangioma were included in this study. All patients had cardiovascular work-up before treatment. Propranolol was administered in a dosage of 2 mg/kg/day. Result: Excellent regression was achieved in 60 cases (93.75%). with no significant response in four cases (6.25%). There were rapid opening of eye within 2 weeks in cases of periorbital hemangiomas and rapid relief of micturition within 1 week of treatment, in cases of vulval hemangioma. Epithelialization was achieved within five weeks of beginning of treatment in all cases of ulceration. Conclusion: Propranolol is highly effective against difficult and complicated hemangioma with low adverse events rates.

Keywords:

Key words: Difficult infantile hemangioma, complicated hemangioma, propranolol therapy, problematic hemangioma, first line treatment for problematic hemangioma, early management of complicated hemangioma.

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