PROPRANOLOL IN THE TREATMENT FOR SEVERE HAEMANGIOMAS OF INFANCY - A CASE REPORT

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Aim: To determine the role of propranolol in the therapeutic strategy of severe haemangiomas of

infancy.

Materials and methods: Twenty days old female newborn was admitted to hospital with congenital infantile haemangiomas in progressive stage with a beard distribution. At birth haemangiomas were not present. Haemangiomas in a beard distribution may be associated with upper airway or subglottic involvement. Numerous treatment modalities with serious complications have been advocated, tracheotomy, systemic steroids, carbon dioxide laser, interferon alfa-2a. There are recent reports of effective treatment of haemangioma with systemic propranolol.

The methylprednisolone therapy was started and the progression of visible skin lesions was stopped. However, the significant inspiratory stridor was noticed at the age of one month and laryngoscopy was done. Subglottic haemangioma was spotted arising posterolaterally obstructing of the airway. Tracheostomy was not done due to a large haemangioma at the front side of the neck. Infant was intubated with spontaneously breathing. The treatment with propranolol was started.

Results: Patient responded dramatically to systemic propranolol. 48 hours after the initiation of treatment we observed a change in the skin haemangioma from intense red to purple, she was breathing spontaneously without tube and just silent stridor was present. After these initial changes, the haemangiomas continued to improve. No side effects of the therapy occurred. Daily steroid dose was decreased.

Conclusions: Propranolol appears to be an effective treatment for severe haemangioma of infancy and should now be used as a first-line treatment in subglottic haemangioma when intervention is required.