HEMANGIOMAS IN CHILDREN. TREATMENT TRENDS

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Introduction

Vascular tumors are some of the most common birth defects. In 1982 Muleikin J.B. and Clowacki I. proposed the biological classification system, dividing the vascular maformative anomalies into the biologically active ones (hemangiomas) and biologically inactive - vascular malformations.

Keywords

Children, hemangioma, treatment.

Purpose

The aim of this paper is to clarify the clinical anatomical differences that would facilitate the diagnosis and to present therapeutic options (some new ones) regarding hemangiomas.





letoda de tratament	Nr.	%
xcizie totala	981	55,
xcizie subtotala	85	4,8
iatermocoagulare	174	9,8
tilizarea firelor de Cuprum in hemangioame.	203	11,4
tilizarea firelor de Cupru in MV	103	5,8
ratament local complex	3	0,2
ratament sistemic complex	66	3,7
ratment combinat	98	5,5
aparatomie mediana superioara	1	6,8
resectie partiala a lobului drept al ficatului		0,2
otal	1784	100

Virsta	Nr. de cazuri	%	20,01%	
1-3 luni	357	20.01	23,26%	■ 1-3 luni
4 luni-1 an	725	40.63		4 luni-1 an
1-5 ani	287	15.91		1-5 ani
6-17 ani	415	23.26		6-17 ani
Total	1784	100	15,91% 40,63	5%

Material and methods

From the clinical material of the pediatric surgery service of *Natalia Gheorghiu* SPNC for Pediatric Surgery studied over a period of 20 years (2000-2020) we selected for our study a number of 1784 patients with hemangiomas. We evaluated the epidemiology, location, age at which they were diagnosed, complications and methods of diagnosis and treatment. We studied the advantages of intralesional injection of Bleomycin, Corticosteroids, intratumoral and extravascular embolization, laser therapy, mechanical compression, cryotherapy, the use of Propanolol, as well as surgical treatment.

Results

Patients with hemangiomas of various locations (cutaneous, pulmonary, reteroperitoneal, hepatic, renal, spinal, facial, scalp, intranasal, labial) benefited from differentiated treatment, on a case-by-case basis.

Conclusions

- 1. Our study shows the advantages of the non-operative method of treatment of hemangiomas in newborns and infants by intralesional therapy of Prednisolone.
- 2. The attitude of our clinic is to solve hemangiomas either conservatively or surgically and not to wait for regression, due to their unpredictable evolution.
- 3. Surgery must be preceded by complex investigations (USG, CT with angiography, Doppler) to clearly determine the hemangioma and avoid surgical complications.



