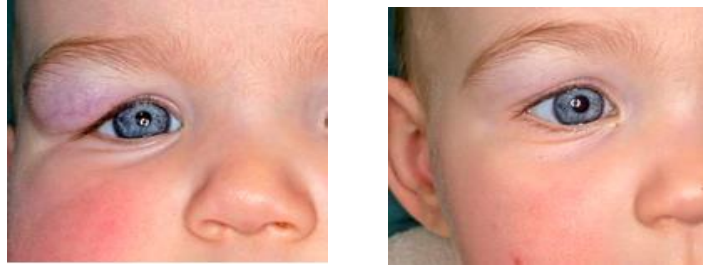


Information for Parents / Carers of a child

Treatment of Haemangiomas with Propranolol



What is an Infantile Haemangioma?

Infantile Haemangiomas (strawberry birthmarks) are abnormal growths of blood vessels just below the skin. They are very common, occurring in one in ten babies.

Haemangiomas appear small and flat shortly after birth but may become larger or problematic later on. Common sites are the head or neck but they can occur anywhere on the body, including the internal organs.

Haemangiomas grow fastest in the first few months of life (proliferate phase), after which time growth slows down but occasionally growth can continue after the first year of life. Fifty per cent of haemangiomas will have resolved by the time a child reaches five years of age and virtually all are improved before puberty. Most will leave some small mark.

How and when are haemangioma treated?

Most haemangiomas do not need any treatment as they will shrink spontaneously over time. Treatment is considered:

- If the haemangioma is encroaching on the eye, nose or lips.
- If there is interference with breathing, feeding or bowel movements
- If there is potential for significant disfigurement.



If treatment is required, propranolol is currently the drug of choice.

What is propranolol?

Propranolol belongs to a group of medicines called beta blockers. Propranolol has been used for many years for children with other medical problems. Its success in treating haemangiomas was first reported in 2008.

How does propranolol help?

Propranolol can make small blood vessels tighten within the haemangioma. This is particularly helpful in haemangiomas as it reduces the blood flow, lightens the colour and makes haemangiomas softer. It also slows the growth and speeds up shrinkage in the majority of cases.

Are there side effects?

Medicines are prescribed to make your child feel better but sometimes they have other effects (side effects)

Side effects of propranolol include a slow heart rate and low blood pressure, which will be monitored by the medical team. Other side effects include:

- Cool extremities (*hands and feet*)
- Sleep disturbance (*restlessness, night terrors*)
- Wheezing (*Should link with GP*)
- Low blood sugar. This is more common in premature babies or if a baby is off usual feeds
- Loose stool

What should you look out for?

If you notice persistently cold feet or if your baby is unwell, clammy, pale, weak or listless, this may be sign of low blood pressure or low blood sugar.

What should you do?

Phone the hospital 01 428 2532 / 2646) and speak to a member of the Dermatology Team.

If your concern is urgent, take the baby to your GP or the nearest hospital or ring 999.

How can you avoid some of these side effects?

- Give the propranolol after feeds and avoid long periods during the day and night without feeds.
- **Infants less than 6 weeks should feed every 4 hours, between 6 weeks and 4 months every 5 hours, over 4 months of age should feed every 6-8 hours.**
- Most babies benefit from wearing extra socks under their Babygro to keep feet warm.

What does starting propranolol involve?

Most babies can start treatment as an outpatient. Premature babies or babies with underlying medical conditions may have to be admitted for observation and review by other specialties.

Your baby will have a clinical photograph before commencing propranolol so that we can monitor progress.

Weight, blood pressure and heart rate will be checked.



Follow up

Patients return to the Dermatology Nurse clinic for monitoring one week after starting treatment.

Please bring bottle of medication with you to all appointments to confirm the dose.

Your baby will attend for review every 1-2 months so that we can monitor weight, heart rate and blood pressure and adjust the dose if needed.

Shared care may be arranged with your local hospital if possible.

How long will my child be on propranolol?

Patients are usually on propranolol for at least six months but this can be longer depending on the location of their haemangioma and the response to treatment.

How is propranolol administered?

Propranolol is in liquid form and is usually taken by mouth twice or three times daily. The dosage may be adjusted by the team based on weight gain or as per clinical response.

There are many strengths of propranolol available, however propranolol **50mg/5mL oral liquid** is the recommended preparation from CHI Crumlin. It is advised that you do not switch between preparations. This concentration has been chosen so that your child does not need to take a large volume of liquid per dose.

Ensure you keep all appointments. If you need to cancel appointments, please contact the dermatology department to discuss.

