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Propranolol in the treatment of infantile haemangioma

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Background: Infantile hemangioma (IH) is one of the most common tumoral lesions in childhood. There are several medical or surgical therapeutic options, all with sub-optimal results. Recently, it was described the successful use of propranolol for involution of IH. We report the results of a multicenter experience with this therapeutic option.

Objective: Prospective evaluation of efficacy and safety of propranolol for the treatment of IH.

Methods: Prospective evaluation of clinical data of all patients with IH referred to a Paediatric Cardiology center during the year 2010 to start treatment with Propranolol. Efficacy was evaluated as a reduction of the lesions. Safety was evaluated by collecting data regarding significant secondary side effects (hypoglycemia, hypotension, bradycardia, drowsiness). A baseline cardiac evaluation included ECG and echocardiogram. Propranolol was started as an outpatient and titrated to a target dose of 2-3mg/kg/day according to clinical response.

Results: During the year 2010, 12 patients (6 female) were referred for propranolol treatment of IH, at a mean age of 4 months (min 1; max 9). Baseline blood pressure, fasting glycemia, heart rate and ECG were normal in all patients. Four had benign associated heart disease: three atrial septal defects and one patent ductus arteriosus. The mean initial dose was 1,1 mg/kg/day, titrated to a mean maximum dose of 2,7 mg/kg/day. With a mean follow up of 8 months (min 4, max 13). All patients showed a significant reduction of the IH dimensions. There were no side effects.

Conclusions: Our preliminary experience confirmed Propranolol as a successful and safe treatment for IH. We believe that at this point, a cardiac evaluation is warranted due to potential associated cardiac defects and secondary effects. Larger studies are necessary to confirm this approach before widespread use without involvement of Pediatric Cardiologists.