

Review supports early multimodal Tx for infantile hemangioma

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(HealthDay)—Early multimodality treatment seems to achieve best



results for children with infantile hemangiomas of the nose, according to research published online May 11 in *JAMA Facial Plastic Surgery*.

In an effort to gain insight into the preferred approach to the treatment of <u>infantile hemangiomas</u>, Robert G. Keller, M.D., from the Medical University of South Carolina in Charleston, and colleagues reviewed the current literature and evaluated the results of a review of 86 patients with infantile hemangiomas of the nose treated from 1999 to 2015. Patients underwent single modality and multimodality treatment with pulsed-dye laser, <u>oral corticosteroids</u>, intralesional corticosteroids, propranolol hydrochloride, and surgery (73, 11, two, 30, and 50 patients, respectively). Data from nine articles were included in the review.

The researchers found that the literature from the era prior to propranolol approval supported early use of oral or intralesional corticosteroids; in cases of unacceptable outcome these should be followed by surgery or pulsed-dye laser. From the era after propranolol approval, literature supported early initiation of oral β -blockers until proliferation ceased or additional intervention was needed.

"There exists a general consensus between the <u>literature</u> and clinical experience advocating for early multimodality <u>treatment</u> to achieve the best result possible by the time the children reach certain sociodevelopmental milestones," the authors write.

One author disclosed financial ties to Pierre-Fabre Pharmaceuticals.

More information: <u>Abstract/Full Text (subscription or payment may be required)</u>

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