



Leading Vascular Science

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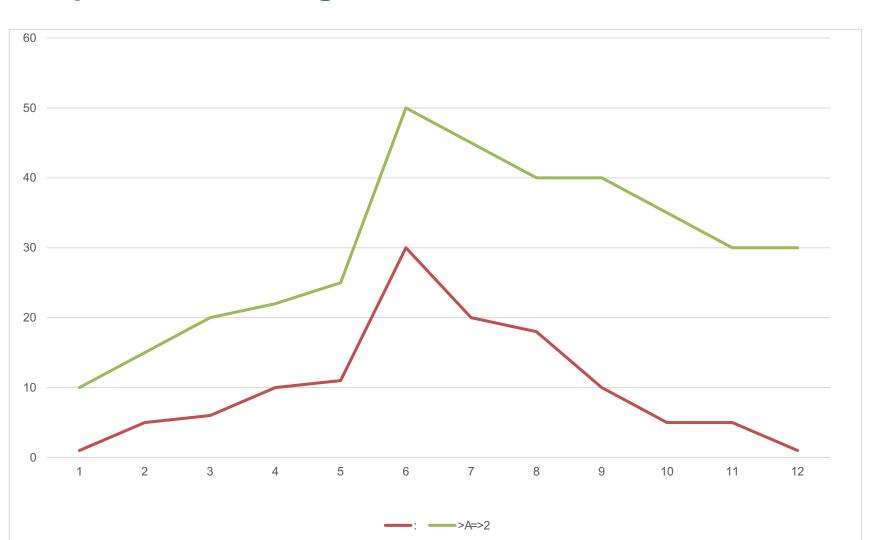
Complicated Hemangioma Treatment Strategy

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INTRODUCTION

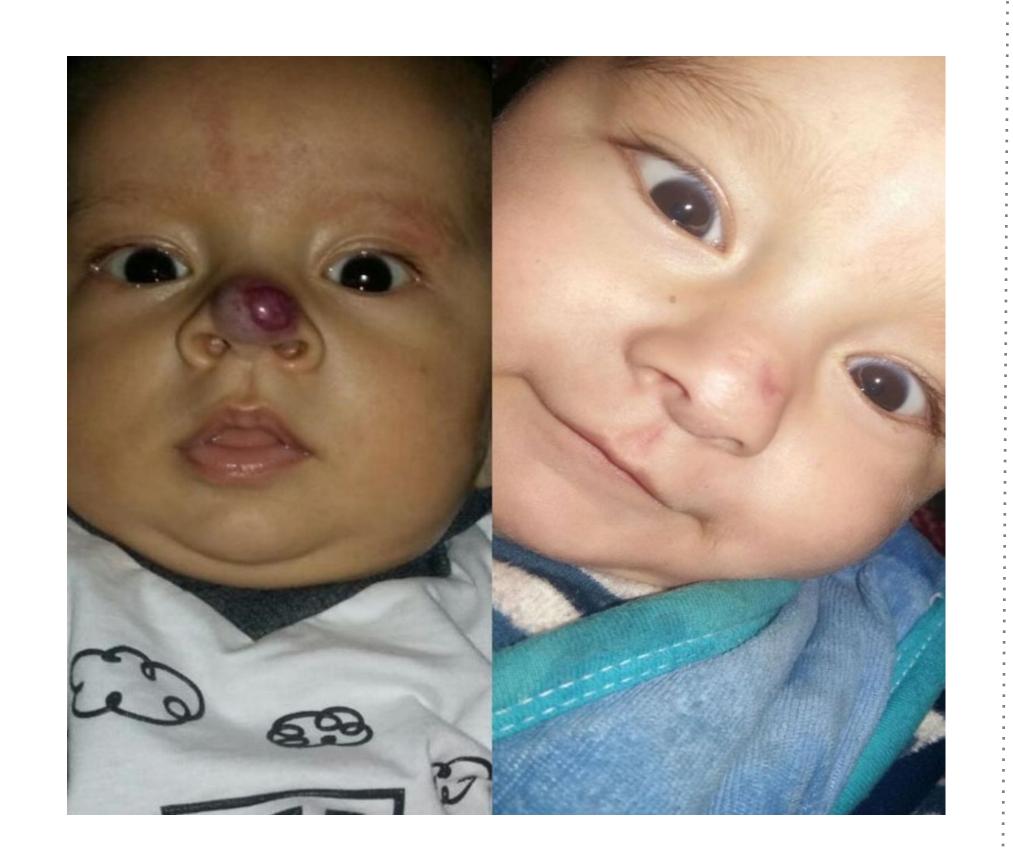
Infantile haemangioma (IH) is the most frequent benign tumor in children. At present most complicated hemangiomas observed Aral see region, Karakalpakistan republic. At present, ulcerated wound with anemia usually reduce frequency of good outcome. Still some doctors ask that superficial IH should choose to wait-and-see. Everyday wound cleaning is painful for a kid. Additional anemia treatment medicaments is not allowed. Normal healing process takes at least 10 days, but in case of infected and anemic situation are more than 2 weeks. Therefore, the purpose of this study is to investigate the relationship between wounded IH with anemia and thickness after healing superficial IH involution. In addition, compare the Sequelae difference between 595-nm pulsed laser combined with propranolol treatment and wait-and-see

Complicated hemangioma evolution



Hemangioma ulcer





METHODS

Materials and Methods: This retrospective observational study included patients with wounded IH treated in the past 5 years and spreader divided them into a laser group and an observation group.

as necessary.

Laser treatment and propranolol

Resuts	Age <6 month	>6	hb g/l
good	47%	20%	+20
Near clear	42%	15%	10
Non treated	11%	65%	5



Treatment results

Type	Regrowth (%)	Residual hemangioma (%)	scars	Functional	summary
Wait and see	71,4%	28,6		33,3	
Hormonal treatment	36,4	63,6	-		
Surgical	23	77	100	23	
serolimus	12,5	87,5	100	31,2	
X ray	25	75	75	25	
electro cautery	26,7	73,3	100	6,7	
Laser	-	-	100	-	
A53> %	25%	56,6%	63,3%	18,9%	100%



RESULTS

The incidence of sequelae in the laser group with propranolol was 84.6%, and the incidence of sequelae in the observation group was 26.4%. The incidence of reduction of wounded IH in the laser group was lower than that in the observation group (Ç2-test, Ç2=10.790, P <0.001). In the observation group, the average A scores of the three wound thickness subgroups (<2mm, 2–5mm, and >5mm) were 4.38, 3.39, and 1.80, and there were differences in the A scores between the three groups (Kruskal–Wallis, p<0.05). There is a significant difference in the A score between the laser group and the observation group in the IH with a thickness of 2–5 mm and>5mm (Wilcoxon rank sum test, P<0.05).





CONCLUSIONS

This retrospective study showed that the degree of Sequelae of IH after involution is related to its thickness. In addition, the early intervention of 595-nm pulsed laser combined with propranolol can reduce the incidence and extent of sequelae.

BIBLIOGRAPHY

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