

# Strawberry Hemangioma Natural Cure. Case Report

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## Abstract

Hemangioma are not usually present at birth but rapidly increases in size before involution. They occurs commonly in infancy. They are common in premature babies, females are three times more common than males. 80% are present in first month of life, 60% occurs in head & neck. They usually grow from 6 to 18 months and then start involution and complete involution occurs in 9 years.

We are presenting a case of

**Name:** Kainat

**Age:** 6 months presented with strawberry hemangioma, her parents were asked to leave it alone without any treatment until and unless it gets complicated like ulceration, infection and starts bleeding. Then she again presented at age of 4 years with involution of 60% and then she presented at 12 years with complete involution (resolution). This case is presented for the reasons of that such lesions involute without any treatment this for those hence they should not be actively treated with any therapy until unless they get complicated.

**Keywords:** Strawberry Hemangioma, Self Involution.

## Introduction:

Strawberry Hemangioma is the largest type of benign vascular tumor, is most common in skin, subcutaneous tissue and mucous membrane of the oral cavity and lips. They are also occurring in liver spleen and kidney. The strawberry type of capillary Hemangioma of newborns is extremely common 1 in 200 births. They may be multiple, grow rapidly in 1<sup>st</sup> few months, begun to fade when the child is between the age of 1 to 4 years and regress by the age of 12 years in 75% to 90% of cases. Strawberry Hemangioma is bright red to blue and is level with the surface of the skin or slightly elevated, with intact covering epithelium. Histopathologically capillary hemangiomas are usually lobulated but uncapulated aggregates of closely packed thin wall capillaries usually blood filled and lined by flattened endothelium separated by scant connective tissue stroma. The aim of reporting this interesting case is to create its awareness among the health care professionals and to highlight pathophysiological, morphological and clinical features of this common entity with its management.

**Case report:-** A baby was presented at the age of 6 months with chief complaint of a swelling of the right cheek of 5 months duration. It was soft and doughy in consistency, there was no other abnormality on face, head and neck but the skin over the mass was bright red in color ( fig a ).



The clinical diagnosis was strawberry hemangioma and in a view of tendency for ultimate regression of these lesions observation was advised. On 2<sup>nd</sup> clinical visit at age of 4 years involution has started marked regression about 60% was observed (fig.b) and on the 3<sup>rd</sup> visit at the age of 12 years there was complete involution(fig.c).

**Discussion:-** Strawberry hemangiomas on infants and younger children are quite common and most often are not anything to worry about unless they impair the vision or absent the air way external acoustic meatus. Or present with intrinsic complications like bleeding ulceration and infections Medical treatment for strawberry hemangiomas on infants usually is not required and more often it will do more harm than good. Unless the hemangioma is too large or is located in a position that could cause complications, as mentions above.

Strawberry hemangiomas on infants is the term usually associated with a red birthmark that are often found on infants and young children. Boston's Children's Hospital has estimated that between four to ten percent of light-skinned babies will be born with or develop a strawberry hemangiomas. They are found on newborn girls more often than on boys; by a rate of four to five times higher. No medical reason for this has ever been discovered. Strawberry hemangiomas on babies is usually characterized by a growth of hardened blood vessels usually found just below the skin and can appear anywhere on the body. No definitive cause for strawberry hemangiomas has been discovered as yet and there are no controllable risk factors that will increase or decrease the odds of developing one.

In most instances strawberry hemangiomas on infants will look worse than it actually presents. They normally don't cause any pain or functional impairments. The Mayo Clinic states that most strawberry hemangiomas on infants will shrink and fade over time. It is estimated that ninety percent of strawberry hemangiomas will be

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totally gone before the age of ten. It is very rare that a hemangioma will be located in an area that will impair the vision or any other physical functions. If that is the case a physician should decide what the treatment, if any should be.

For the most part, strawberry hemangiomas on infants will be harmless, but in certain cases there will be impairment issues for your child and there are a few treatment options. Laser surgery is probably the most frequently used treatment option. It can be used to completely remove the hemangioma or it can stunt its growth. This treatment is not used in instances where there are no functional impairment issues as the side effects of laser surgery can be severe. They can include infection, scarring around the area, and severe pain for your child.

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