## MANAGEMENT OF INFANTILE HEPATIC HAEMANGIOMAS IN THE PROPRANOLOL ERA

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**Aim of Study:** Infantile Hepatic Haemangiomas (IHH) are the commonest liver tumours in infancy and due to improved antenatal and postnatal ultrasound its apparent incidence is increasing. Increasing therapeutic use of propranolol may have altered outcome in recent years. We describe the characteristics, management and outcomes of the largest series of IHH to date and aim to assess the efficacy of propranolol as a treatment modality for these lesions.

**Methods:** Retrospective, single-centre clinical and radiological review of IHH. Statistical analysis was performed using Chi<sup>2</sup> comparison with P≤0.05 considered significant.

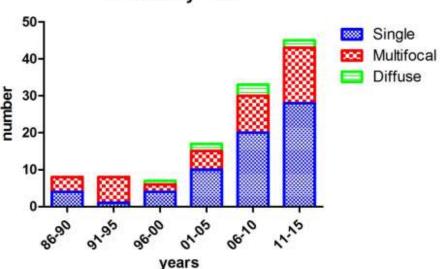
**Results:** 125 (66, 53% female) infants presented between 1986-2016. Lesions were classified as single (n=70,56%), multifocal (n=46,37%) or diffuse (n=9,7%) based on review of radiological imaging. Antenatal detection started in 2001 and was seen in 17 (14%, all single lesions). Expectant management was the primary strategy in 44% (n=55) and in the remainder definitive treatment was medical with propranolol (n=23,18%); medical without propranolol (n=7,6%); surgical resection (n=14,11%); hepatic arterial ligation (n=24, 19%) and transplantation (n=2, 2%).

Since the introduction of propranolol in 2008, 77(62%) infants have presented with a non-significant increase in single (vs. multifocal & diffuse) lesions (60%vs.50%; P=0.14) and an increased proportion treated without surgical intervention (79%vs.50%; P=0.0003).

Overall survival was 122/127(96%) and has improved significantly since 2008 (99%vs.92%; P=0.03).

## Conclusions:

- Multimodal treatment is highly effective for IHH and survival has improved since the introduction of propranolol with a reduction in the need for surgical intervention.
- Single lesions appear to have become more prevalent, most likely due to increased antenatal and incidental detection.





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