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## CAPILLARY HEMANGIOMA: A CASE REPORT Cathy Y Qin

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his is a case report on pediatric capillary hemangioma on a four year-old Caucasian female. She was born full term without complications and has no developmental concerns. Her Mom reports history of soft mass lesion on the lateral portion of left upper eyelid. MRI showed extraconal capillary hemangioma of the left anterior orbit along the frontal zygomatic suture area with a mild proptosis. The lesion does not extend posteriorly into foramina. Her uncorrected visual acuity is 20/20 OD and OS. She has equal Brucker and 20 arc seconds stereopsis. Cover test showed ortho position both distance and near and induced tropia test was negative. Ocular health is unremarkable other than asymmetrical optic nerve cupping of 0.2 OD and 0.4 OS. Cycloplegic refraction showed OD +2.00+0.25x090 and OS +2.00 DS. External exam showed elevated mass on left upper lid with slight blue discoloration (external photography taken). Differential diagnosis includes but was not limited to dermoid cyst, rhabdomyosarcoma, lymphangioma, neuroblastoma, lacrimal gland tumor. Epidemiology studies showed capillary hemangioma is the most common benign vascular tumor in children, forming 10% of all pediatric orbital tumors. This condition was three times more likely in females. Management depends on how much capillary hemangioma is affecting vision and ocular health. Treatment options include observation, amblyopia management, intralesional corticosteroid injection, systemic corticosteroids, surgical excision, radiotherapy and systemic propranolol. Potential ocular complications include changes in refractive error with concern of high astigmatism and anisometropia, deprivational amblyopia, strabismus, ocular motility restrictions, exposure keratopathy, and optic nerve compression. This patient does not show signs of amblyopia, strabismus or ocular motility restrictions. MRI showed no concern of optic nerve compression. No intervention was required; she will be monitored yearly with comprehensive exams. More detailed functional vision will be assessed next year before she starts school



Figure 1: Axial MRI scans



Figure 2: Coronal MRI scans

## **Biography**

Cathy Y Qin has completed her Masters and Doctor of Optometry from Pacific University College of Optometry. She is currently completing her Residency in Ocular Disease and neuro-rehabilitation at Gundersen Health System in Wisconsin, USA.

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