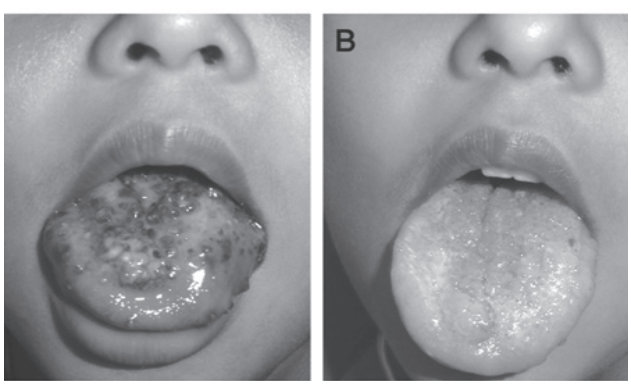

TONGUE LESIONS IN TODDLER

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One year six months old female baby presented with recurrent multiple red and blue colored eruptions from her dorsal surface of the tongue with drooling of saliva for past two days. They were painful and restricted the movement of the tongue. The eruptions were 2mm x 2mm x 2mm in size; dark red colored and bluish at the centre. These eruptions exfoliated occasionally with black colored blood clot (Fig.1A). Mild oozing from the exfoliated site had been noticed for less than fifteen minutes. Histopathological examination revealed small, capillary-sized vascular channels lined by endothelial cells with fibrous bands. She was treated with oral propranolol of 1.5 mg/kg/day and continued for more than one year. After one year follow-up, the lesion was subsided completely (Fig.1B).

What is the diagnosis?

Tongue hemangioma. Hemangiomas are vascular malformations or hamartoma that may rise from capillary or vein or the artery.Hemangiomas are occurring in as many as 2.6 percent of neonates and 12 percent of children aged 1 year. (1) The prevalence of tongue hemangioma is found to be 11 percent. Approximately 89.6 percent hemangiomas in infants are located in the periorbital mainly in the upper or lower eyelid area and 70.6 percent of patients are girls. (2) The lesion is characterized by its bright red color, raised texture and lobular appearance. (3) Most hemangiomas require no treatment. Though they are typically benign, some of them may progress

to produce complications such as fissure formation, ulceration, bleeding and compression of airway mainly in the rapid proliferative phase. Potential complications also include Kasabach-Merritt syndrome. Medical treatment of tongue hemangioma includes the administration of oral propranolol and intralesional injection of corticosteroids. Second-line pharmacologic agents include vincristine or interferon alfa-2b. In addition to medical treatment, radiotherapy, cryotherapy, laser therapy, injection of sclerosing substances and the selective embolization of the lingual artery are also seem to have some efficacy. (4)

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