# Haemangioma (Vascular Malformation)

Information for patients

## What is a haemangioma?

A haemangioma is a benign (non-cancerous) collection of blood vessels that forms a lump or swelling in the soft tissues. Haemangiomas are among the most common benign soft tissue growths and can occur in various parts of the body including muscles, skin, and other soft tissues.

**Important distinction:** There are two main types of vascular lesions:

- **Infantile haemangiomas** - vascular tumours that appear after birth, grow rapidly, then gradually shrink (these typically require paediatric care)
- **Vascular malformations** - present from birth, grow proportionally with the child, and do not disappear spontaneously (this leaflet focuses on these)

In adults, the term "haemangioma" usually refers to a benign vascular malformation of blood vessels that has been present since birth but may only become noticeable later in life.

## What causes haemangiomas?

Haemangiomas are congenital abnormalities of blood vessel development. They:

- Form before birth but may not be noticed until later
- Are not caused by anything you did or didn't do
- Usually occur randomly (sporadically)
- Rarely run in families
- Are not related to injury or trauma

The exact cause is not fully understood, but they represent a developmental variation in how blood vessels form.

## What are the symptoms?

Many haemangiomas in adults cause no symptoms and are found incidentally during scans for other reasons.

### Common features:

- A soft, compressible lump under the skin
- May feel slightly warm to touch
- Usually painless
- Can vary in size from small to several centimetres
- May have been present for many years without causing problems

### Possible symptoms:

- Mild aching or discomfort, especially after activity
- Cosmetic concerns if visible
- Swelling that may increase with activity or heat
- Rarely, may cause weakness if very large

## How is a haemangioma diagnosed?

Your imaging scans (ultrasound, MRI, or CT) have identified features typical of a haemangioma:

- Characteristic appearance of dilated blood vessels
- Well-defined borders
- Typical patterns of blood flow on Doppler ultrasound
- No features suggesting a more serious condition

The imaging findings are usually sufficient to make a confident diagnosis without needing a biopsy.

## What types of haemangiomas are there?

Haemangiomas are classified based on which type of blood vessel is predominantly affected:

### Venous malformations (most common):

- Composed of abnormal veins
- Slow blood flow
- May feel soft and compressible
- Can sometimes be emptied by pressure

### Capillary malformations:

- Involve small blood vessels
- Often flat or slightly raised
- May appear as a port-wine stain on the skin

### Arteriovenous malformations (less common):

- Involve both arteries and veins
- Fast blood flow
- May feel warm and pulsatile
- Usually require specialist assessment

## Do I need treatment?

Most haemangiomas in adults do not require treatment. They are:

- **Completely benign** and not cancerous
- **Not dangerous** to your health
- **Do not spread** or grow uncontrollably
- **Stable** over time in most cases

### Treatment may be considered if:

- The haemangioma causes significant pain or discomfort
- It affects function or movement
- There are cosmetic concerns
- It is growing noticeably
- There is diagnostic uncertainty

## What treatment options are available?

Most haemangiomas identified in adults are simply monitored without active treatment.

**Observation:** Regular monitoring with clinical examination.

**Cosmetic removal is not managed by the sarcoma service.** For symptomatic lesions or those with diagnostic uncertainty potential interventions may include:

**Biopsy:** A sample of tissue is taken to confirm diagnosis.

**Sclerotherapy:** Injection of medication to shrink the blood vessels.

**Surgical removal:** Complete excision of the malformation.

**Laser therapy:** For superficial capillary malformations.

**Embolisation:** For larger or arterial malformations, performed by interventional radiologists.

## What is the outlook?

Haemangiomas in adults have an excellent outlook:

- They remain benign throughout life
- They do not turn into cancer
- Most remain stable in size
- They can be successfully treated if causing symptoms
- There are no lifestyle restrictions
- Exercise is safe and encouraged.

## When should I seek medical advice?

Contact your healthcare provider if you notice:

- **Rapid growth** of the haemangioma
- **New or worsening pain** in the area
- **Skin changes** over the lump (redness, warmth, breakdown)
- **Significant swelling** that doesn't resolve
- **Functional problems** affecting daily activities
- **Any concerns** about changes.

## Pregnancy and haemangiomas

Some vascular malformations may become more prominent during pregnancy due to:

- Hormonal changes affecting blood vessels
- Increased blood volume
- Changes in blood flow.

This is usually temporary and the malformation returns to its previous state after delivery.

## Key points to remember

- Haemangiomas are **completely benign** (not cancerous)
- They **do not turn into cancer** or spread
- Most **do not require treatment**
- You can **live normally** with a haemangioma
- They **do not affect life expectancy.**

## Frequently asked questions

### Q: Is a haemangioma a type of cancer?

A: No, haemangiomas are entirely benign and are not related to cancer in any way.

### Q: Will it keep growing?

A: In adults, most haemangiomas are stable in size. Unlike infantile haemangiomas, adult vascular malformations do not have a growth phase.

### Q: Should I be worried about blood clots?

A: While blood flow in haemangiomas can be slow, serious clotting problems are rare and typically only seen in very large malformations.

### Q: Can it be removed completely?

A: In many cases yes, though this depends on the size, location, and depth. However, removal is usually not necessary unless causing symptoms.

### Q: Will it affect my children?

A: Most haemangiomas occur sporadically and the risk of passing it on is very low.

### Q: Do I need regular scans?

A: Routine follow-up scans are not necessary for stable, asymptomatic haemangiomas.

## Contact information

If you have any concerns or questions, please contact:

- Your GP in the first instance
- The Bone and Sarcoma Service if specifically advised to do so.

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*This leaflet provides general information only. Always follow the specific advice given by your healthcare team.*