

# Liver or hepatic hemangioma

*Patient Information Series – What you should know, what you should ask.*

## What is a hepatic hemangioma?

A liver or hepatic hemangioma (HH) is a benign (not-cancerous) liver tumor made up of small blood vessels which can sometimes be seen on ultrasound before a baby is born. Hemangiomas are relatively common in infants but usually happen on the skin and are found after birth. Hemangiomas usually grow and then slowly go away on their own. There are two types of liver hemangioma: congenital hemangioma and infantile hepatic hemangioma. The difference between the two is based on whether or not the HH is full size at birth (congenital) or grows after birth (infantile).

## How does a HH happen?

It is not clear why an HH occurs. In most cases, an HH occurs spontaneously without any recognized triggers or risk factors. Scientists are studying many theories about what causes the blood vessels in HH to start to grow. HH is not usually due to any genetic or chromosomal problem. HH usually happens in the second half of a pregnancy so may not be seen on earlier ultrasounds.

## Should I have more tests done?

Because HH is so rarely seen in pregnancy, sometimes it is difficult to recognize and may be mistaken for a cancer. Many patients will have more specialized ultrasounds and other tests done to help know for sure. The tests available depend on where you are. Tests to ask about include:

- **Fetal echocardiography**, a fetal heart ultrasound, is usually recommended to look more closely at the baby's heart. This is a specialized ultrasound of the heart during the pregnancy.
- **Fetal MRI scan** can sometimes be done to provide more information on the tumor. This scan uses strong magnets to create detailed images of the inside of the body. There is no radiation exposure to the fetus.

## What are the things to watch for during the pregnancy?

Sometimes, extra blood flow through the HH can cause stress on the baby's heart or other problems. Because of this, extra ultrasounds are often done to check the size of the HH and to look for any signs of heart trouble. If there is concern that the baby is showing signs of heart failure or other problems, your doctor may recommend an early delivery so that the baby can be treated.

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## **What does it mean for my baby after it is born?**

Many HH seen during pregnancy will be asymptomatic at birth, meaning they will not cause any problems for the baby. An ultrasound will be done after birth (and sometimes a CT or MRI scan or blood tests) to confirm the tumor is an HH. Once this is certain, the baby and the HH will be monitored or watched. Most of the time, the hemangioma will go away on its own. Some babies will be born with complications, and some HH may grow after birth and cause problems. Sometimes, these problems can be serious, but this is uncommon. There are treatments available for HH if this is needed.

## **What other questions should I ask?**

- How big is the hepatic hemangioma?
- Are there any signs on ultrasound that it is affecting the baby?
- How often will I have ultrasound examinations done?
- Where should I deliver?
- Where will the baby receive the best care after it is born?
- Can I meet the team of doctors that will be assisting my baby when it is born in advance?

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