hemangiomas are present to check for involvement of the liver or spleen, said Dr. Hochman of Charleston, S.C.

Dr. Buckingham warned that hemangiomas on the upper or lower eyelid can endanger vision permanently and deserve referral to a pediatric ophthalmologist.

There is no consensus on treating hemangiomas. Photodynamic therapy (PDT), steroids, and surgery are the main treatment options. Treat superficial or rapidly proliferating hemangiomas every 4-8 weeks with PDT, a safe option with very little risk of scarring, he said.

PDT on the area around an ulcerated hemangioma can help heal the ulcer, data show. Retreat every 4-6 weeks if needed, Dr. Buckingham suggested. PDT also cleans up residual telangiectasias.

For deep hemangiomas, inject steroids into the lesion or try a 10-week course of oral steroids during proliferation; expect a 30%-90% response. Combine steroids and photodynamic therapy for compound lesions. Refer children on oral steroids to an endocrinologist for weekly evaluation.

Reserve surgical debulking for cleanup during involution, or during the proliferative phase for hemangiomas that don’t respond to steroids or that threaten vision.

FDA Approves Drops for Chronic Eczematous External Otitis

K OLOA, HAWAII — Fluocinolone acetonide oil 0.01% ear drops are the first drug to earn a Food and Drug Administration indication for the treatment of chronic eczematous external otitis, Dr. Lawrence F. Eichenfield said at the annual Hawaii Dermatology Seminar sponsored by the Skin Disease Education Foundation.

FDA approval for use of the medication in adults and children aged 2 years and up was based on a 154-patient clinical trial in which 5 drops per ear twice a day for 7 days of the topical corticosteroid known as DermOtic oil ear drops proved more effective than placebo in clearing the dermatitis.

Dr. Eichenfield of the University of California, San Diego, has received research funding from Hill Dermaceuticals Inc., which markets DermOtic.

—Bruce Jancin