benefit of pediatricians. We report this case for the general pediatricians are not as well informed about this tumor as dermatologists and otolaryngologists. We report this case for the benefit of pediatricians.

**Abstract 626 Figure 1**

**Background** The infantile hemangioma (IH) is the most common benign vascular tumor in children. The most cases do not require therapeutic intervention. However, 10% of these cases require a treatment because of a life-threat, a functional trouble, a local complication or esthetic risk. We study the efficiency of Propranolol in the control of infantile hemangioma.

**Methods** Eight infants presented with 8 infantile hemangiomas treated by oral propranolol at a dose of 2 mg/kg body weight per day. Treatment outcomes were clinically evaluated.

**Results** The treatment was initiated during infancy in all cases (mean, 12.7 months). Five patients were treated with 2 mg/kg per day, and three with 3 mg/kg per day. Patients were monitored at initiation of treatment. The first noticeable effects on propranolol treatment were the changes in color and softening of hemangiomas, followed by regression of their sizes and deep. Response to treatment was favorable; five showed total regression and in three cases a partial regression. The average treatment duration in the remaining patients was 6.1 months. No adverse events were reported.

**Conclusion** Propranolol is an efficacious therapy for infantile hemangiomas. Risks and complications appear moderate. Prospective controlled trials are necessary to observe the effects on a long-term basis.

**Abstract 626 Figure 2**

**Case Report** The AA present the case of a three years old girl, with unremarkable personal or familiar medical background, that presented a facial nonexsudative maculopapular lesion after insect bite. Four months later, in spite of various therapeutic approaches, the lesion was larger with erythematous-violaceous papules. She had no systemic symptoms.

The patient was referred to dermatology. Skin biopsy identified histopathologic features consistent with sarcoidosis. Pulmonary and ophthalmologic examination were normal. Serum angiotensin converting enzyme level was elevated.

She started oral prednisolone 1mg/kg/d with clinical improvement after one month.

**Conclusion** Dermatological manifestations of sarcoidosis should be considered in differential diagnosis of various chronic skin conditions such as eczema, acne or infections. The risk of development of systemic sarcoidosis in patients who present with the disease limited to the skin is unknown. However, studies have shown that younger children have more risk of developing more serious sequelae.

**Abstract 626**

**INITIAL EXPERIENCES WITH PROPRANOLOL TREATMENT OF INFANTILE HEMANGIOMAS: REPORT OF EIGHT CASES**

doi:10.1136/archdischild-2012-302724.0627

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**Background** The infantile hemangioma (IH) is the most common benign vascular tumor in children. The most cases do not require therapeutic intervention. However, 10% of these cases require a treatment because of a life-threat, a functional trouble, a local complication or esthetic risk. We study the efficiency of Propranolol in the control of infantile hemangioma.

**Methods** Eight infants presented with 8 infantile hemangiomas treated by oral propranolol at a dose of 2 mg/kg body weight per day. Treatment outcomes were clinically evaluated.

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**Conclusion** Propranolol is an efficacious therapy for infantile hemangiomas. Risks and complications appear moderate. Prospective controlled trials are necessary to observe the effects on a long-term basis.

**Abstracts**

**628**

**CUTANEOUS SARCOIDOSIS ON A THREE YEARS OLD CHILD**

doi:10.1136/archdischild-2012-302724.0628

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**Background** Sarcoidosis is a multisystemic granulomatous disorder characterized by the presence of noncaseating granulomas in tissues such as the skin, lung, lymph nodes, eyes, joints, brain, kidneys and heart. Sarcoidosis is a rare disease in paediatric age, with an incidence of 0.06/100,000 habitants, in children younger than four years of age. Cutaneous involvement is more common in the pediatric population than in adults. Skin may be involved in 80% of affected children.

**Case Report** The AA present the case of a three years old girl, with unremarkable personal or familiar medical background, that presented a facial nonexsudative maculopapular lesion after insect bite. Four months later, in spite of various therapeutic approaches, the lesion was larger with erythematous-violaceous papules. She had no systemic symptoms.

The patient was referred to dermatology. Skin biopsy identified histopathologic features consistent with sarcoidosis. Pulmonary and ophthalmologic examination were normal. Serum angiotensin converting enzyme level was elevated.

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**Conclusion** Dermatological manifestations of sarcoidosis should be considered in differential diagnosis of various chronic skin conditions such as eczema, acne or infections. The risk of development of systemic sarcoidosis in patients who present with the disease limited to the skin is unknown. However, studies have shown that younger children have more risk of developing more serious sequelae.

**Abstracts**

**629**

**CALCINOSIS CUTIS OF LOWER EXTREMITIES**

doi:10.1136/archdischild-2012-302724.0629

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We present a 16 months old albannian female with firm nodules along her lower extremities, two months ago from now. No history of trauma or recent infections. Life history has no remarkable data, no medicaments has been used during pregnancy. Antirachitic prophylaxis just three months, 400 UI/day. First steps, by age of 14 months.

Family history unremarkable. No consanguinity. Physical examination was unremarkable. Hypertrichosis on the upper periphery, there were focal areas of basaloid cells (figure-2). The pathological diagnosis was pilomatrixoma. No recurrence has been observed during 8 months' follow-up.

**Conclusion** Although pilomatrixoma occurs mostly in children, general pediatricians are not as well informed about this tumor as are dermatologists and otolaryngologists. We report this case for the benefit of pediatricians.
were normal. Abdominal ultrasound unremarkable. Heart ultrasound: unremarkable. Neurological examination, muscle strength and reflexes are normal. EMG: no myopathic changes. ENG: normal. Rtg of lower extremities showed calcifications of soft tissues. Bones with no destruction or osteolysis. Biopsy: on subcutane adipose tissue are found multiple and confluent foci of calcification called Calcinosis. She is without treatment to now and exacerbation of changes has been detected.

**Conclusion** Since there were no systemic metabolic disorders, tissue injury, or other founded reason, and the diagnose of Calcinosis cutis idiopathica was made.

**Acknowledgments** to nurses of nephrology department.

**630 NEUROPSYCHOLOGICAL OUTCOME IN CONGENITAL HYPOTHYROIDISM IN AN ITALIAN COHORT: THE DEVELOPMENTAL QUESTIONNAIRE FOR CH (DQCH)**

**Background and Aims** Several studies on neuropsychological outcome in early treated children with congenital hypothyroidism (CH), have demonstrated the presence of developmental disorders, in particular motor abilities language, emotions. The aim of this study was to individuate the most vulnerable developmental domains and which risk factors are significantly associated with a poor outcome. To this end we have developed a development questionnaire on CH (DQCH).

**Methods** The DQCH has been created with dichotomous answers giving a score which hinders the dispersion of data and makes it easy to fill-in for a person knowing the child (clinical psychologist, physician, parents). It consists of 49 questions, in 7 domains - motor skills, personal autonomy, language development, social development, behaviour, biohythms, and success in school. This questionnaire was designed for an easy way to collect data on developmental milestones and neuropsychological outcome in a large cohort of children with CH and their age-matched controls.

**Results** All domains of our questionnaire show major impairments in children with CH than in controls, in particular in personal autonomy for the group with thyroidal agenesis and social development for ectopic glands.

**Conclusions** We hypothesize that children with a more severe outcome are more frequently those of mothers affected by clinical hypothyroidism or who were exposed to maternal undernutrition during pregnancy.


**631 INFLUENCE OF ANTHROPOMETRICAL AND MENTAL STATUSES ON OCCURRENCE OF BEHAVIOUR DISEASES AMONG CHILDREN OF SCHOOL AGE**

**Background and Aims** To estimate influence of the anthropometrical status and personal features on occurrence of psychosomatic frustration, in particular, eating disorder, among children of school age.

We studied 57 children (age 15±1.3 years). They were interviewed with Toronto Alexithimia Scale (TAS), scale of Rotter, standardized questionnaire “Aim-Means-Result” (AMR), scale of Rean and divided into 3 groups on the basis of body mass index (BMI). 1) A (BMI< 19 kg/m²), 2) B (19 kg/m²≤ BMI< 24kg/m²), 3)C (BMI≥24kg/m²).

**Results** Based on the TAS 41% of boys showed higher than normal rates of alexithymia (A –40%, B –60%, C –100%). Among girls (75%,50%,43% respectively). AMR: 87%b and 82%g can’t substantiate their goals. 50% of children had psychological barriers. Low-energy potential was recorded in Groups A and C (17% and 25%). 66% girls and 88% boys of all groups indicated optimal results. Scale of Rotter. Boys of Group C were dominated by external locus of control. Girls of such group were dominated by internal locus of control. In analyzing the results of the questionnaire of Rean boys tended to reduce the motivation to succeed and grow with the increase of negative motivation with increasing BMI (success from 70% to 25%).

**Conclusion** Since there were no systemic metabolic disorders, tissue injury, or other founded reason, and the diagnose of Calcinosis cutis idiopathica was made.

**Acknowledgments** to nurses of nephrology department.