Skin disorder: Pyogenic granuloma

A pyogenic granuloma (py-oh-JEN-ick gran-you-LOH-ma), or PG, is a small, round, red bump made of newly formed blood vessels.

It is also called a lobular capillary hemangioma (LOBE-you-lar CAP-ill-air ee he-MAN-gee-OH-ma). PGs can happen anywhere on the skin but often appear on the hands, fingers, and face. They are benign (not cancerous), can grow quickly, and may bleed if they’re bumped or scratched.

What causes a pyogenic granuloma?
A pyogenic granuloma often appears after an injury, even a bug bite or scratch. It may also appear if your child uses certain medicines, like isotretinoin (I-so-TRET-in-noyn), but this is rare. A PG can sometimes grow in a port-wine stain (reddish birthmark).

How are pyogenic granulomas diagnosed?
The doctor can usually tell your child has a pyogenic granuloma by looking at it. They may need to take a small piece of the skin and look at it under a microscope (called a skin biopsy) or remove it to diagnose it.

What if my child’s pyogenic granuloma is bleeding?
If your child’s pyogenic granuloma starts bleeding:

• Get a washcloth damp with cold water or wrap it around an ice pack.

• Put some ointment (like petroleum jelly) on the washcloth.

• Push the washcloth against the pyogenic granuloma and apply firm pressure for at least 10 minutes.

If you can’t stop the bleeding, call your child’s healthcare provider.

When a PG is bleeding, it may be scary and seem like a lot of blood. However, it will not bleed enough to cause problems from blood loss.

How are pyogenic granulomas treated?
Pyogenic granulomas are usually treated with:

• Shave removal: A healthcare provider gives your child a numbing injection and uses a tool like a razor to remove the PG from the skin. They then use cautery (heat) to seal the blood vessels closed and stop any bleeding. The healthcare provider will send the PG to the lab to confirm the diagnosis. A shave removal will leave a small, round scar on the skin.
• **Cryotherapy:** Very small PG lesions (skin growths) can be frozen with liquid nitrogen. It may take 2 or 3 sessions spaced a few weeks apart for the lesion to disappear.

• **Medicines:** You can apply imiquimod (im-EE-kwi-mod) cream or timolol (TIE-moh-lol) solution to the pyogenic granuloma’s surface. These medicines may take 2 or more months to work. However, your child may still need a shave removal, as these medicines can’t always make the PG go away completely.

• **Lasers:** A healthcare provider can use a laser to destroy the blood vessels in the pyogenic granuloma. This works best on small PGs that aren’t bleeding much. The provider may give your child a numbing injection or cream before doing laser therapy.

Sometimes a new pyogenic granuloma comes back after treatment or appears in another area. If this happens, contact your child’s healthcare provider.

Notes