



Medicine for Managers

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Birth Marks

Birthmarks are coloured skin lesions that are present at birth or which appear shortly afterwards. They are steeped in folklore and are believed in different countries to be the result of unsatisfied cravings of the mother during pregnancy, inheritance from the mother, sudden maternal shocks and even the result of a kiss from St Mary the Virgin. Despite the beliefs the cause of most is not known.

In essence there are two principal types of birthmarks:

- Those caused by abnormal and excess areas of pigmentation, and they include moles, café-au-lait spots and Mongolian spots.
- Those caused by abnormal clusters of blood vessels under the skin and they include strawberry marks, salmon patches and port-wine stains.

They are benign, quite common and come in a variety of colours ranging from red, purple and pink to blue, black and white. They can occur on any part of the head, neck or body and one estimate puts the incidence at more than 10% of the population.

Pigmented Birthmarks

Café-au-lait spots. They are coffee-coloured, hyperpigmented areas of skin which are common in children.

The areas, which vary of light brown to dark brown, may have smooth or irregular in outline.

Many children will have one or two and they often start as very light in colour but enlarge and darken to become more obvious by the age of two.

Multiple café-au-lait areas (normally at least six) are observed in virtually all patients with neurofibromatosis. This condition results in the development of



(usually non-cancerous) tumours which grow along nerves.

They are genetically determined and appear as smooth lumps beneath the skin.

They are removed surgically if they cause any problems.

Mongolian spots. These marks are present from



birth and are more common in darker skinned individuals. They may superficially appear like a bruise and persist for a months or years, although they generally disappear by the age of four. They are completely harmless and require no treatment.

Congenital Melanocytic Naevi. *Naevus* is the Latin word for 'birthmark' and these moles are



present from birth and vary in size from half-an-inch to ten inches or even more. They may be smooth or lumpy and/or hairy and may have a linear margin or an irregular margin as shown above. They do not generally become malignant although there is an increase in risk the larger the lesion. Some are cosmetically unacceptable and may be removed using plastic surgery techniques.

Vascular Birthmarks

Strawberry Naevus. This so called birth-mark is not always present at birth. It may not appear until a child is several weeks old and it may then grow quickly. Most of them fade in time.



The red colour is the result of a collection of blood vessels close to the skin surface. They most commonly appear on the face, scalp, back and chest although they may occur anywhere. It is of unknown cause and is rarely harmful, although, when on the face it presents an obvious cosmetic defect with which many children struggle to cope and which can be very damaging to self-esteem.

The lesions are normally diagnosed by simple visual inspection but if there is concern about extent, depth or diagnosis it can be assessed by CT or MRI scan.

Normally treatment is delayed in anticipation of spontaneous regression although it does tend to leave a whitish scar noticeably different from the surrounding skin. If it does not regress and the child (or the parents) are too worried, then it may be treated by cryotherapy (liquid nitrogen) or laser therapy or by injection of steroids. None of the methods is without side effects, including scarring and pain. In extreme cases a plastic surgeon may be required to remove the entire lesion for cosmetic reasons or because of a particular risk of bleeding following trauma.

Salmon Patches. Salmon patches (*telangiectatic naevi*), also known as stork marks when they appear on the nape of the neck or angel's kiss

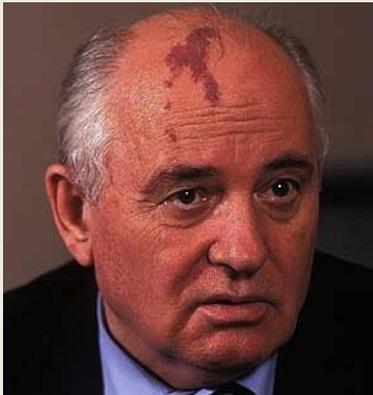


when they appear on the centre of the lower forehead, are flat red or pink patches which are very common in babies affecting up to half of newborns. They usually fade in a few months



although they do take longer to disappear when on the forehead. They are often more noticeable in a crying baby.

Port Wine Stains. Perhaps the most famous port wine stain belongs to Mikhail Gorbachev.



Sometimes known as *naevus flammeus*, they take the form of flat lesions which vary in size and which are normally seen on the chest, back and face, although they can occur anywhere. They range in colour from pink to a deep red colour (hence the name). They are formed of dilated blood vessels and are usually unilateral, that is they do not cross the midline of the body. When on the face, a port wine stain may be associated with **Sturge-Weber syndrome** which is associated with the ophthalmic branch of the trigeminal nerve (supplies sensation over the forehead) and disturbances in the brain. Such patients may suffer from seizures and about 50% develop glaucoma (resulting in loss of vision).

Port wine stains are treated with the same approach as strawberry naevus, by cryocautery, steroid injection or laser therapy but results are variable.

For some patients, the use of camouflage make-up is a successful approach and such cosmetics are available on prescription. The Skin Camouflage service was established in 1975 by the British Red Cross and was transferred to the Charity Changing Faces in 2011. For patients with birth marks (and other skin conditions such as scarring), the specialist products offer a way to cope. There are specialist Skin Camouflage practitioners who are skilled in finding the best colour match for an individual's skin tone and teaching how to apply covering creams and powders. There are about 120 locations across the United Kingdom.

The Charity can be contacted on **0207 391 9270**.
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