



# COVID-19 Q&A with Dr. Milton Waner

Dr. Linda Rozell-Shannon, Phd, President and Founder of the VBF interviews Dr. Milton Waner, world renown vascular birthmarks, anomalies and related syndrome expert regarding COVID-19

Questions and Answers – March 22, 2020

**1. Are patients who are currently taking a beta blocker for an infantile hemangioma at risk? If yes, what are the recommendations for the babies and/or caregiver who either present with symptoms or test positive for COVID-19?**

Answer: Not at an increased risk. If they are exposed, they must speak to their health care provider and let him/her know that they are taking a beta blocker.

**2. Are patients who are taking Sirolimus or other chemotherapy agents for a vascular malformation at risk and if so, what are the recommendations for the patients and/or their caregivers who present with symptoms or are diagnosed with COVID-19?**

Answer: We don't know what the risks are. We have no data. We do know the drug is an immunosuppressant. Consult your doctor.

**3. Are infants treated with chemotherapy agents for complex vascular tumors or related syndromes such as KHE or KMP/S at risk and if yes, what are the precautions for them or their caregivers should they present with symptoms and/or are diagnosed with COVID-19?**

Answer: Same answer as 2.

**4. Should patients with complex Lymphatic Malformations which are reactive to viruses and/or infections have a supply of antibiotics and/or steroids on hand in case they or a caregiver are exposed to or are diagnosed with COVID-19?**

Answer: Consult with their treating physician.

**5. Should infants diagnosed with airway Infantile Hemangioma take any special precautions if they are their caregiver are exposed to or are diagnosed with COVID-19?**

Answer: No special precautions but should continue with treatment.

**6. Should patients being treated for Gorham-Stout Disease, especially those affected in their rib cage, be isolated during the COVID-19 pandemic?**

Answer: Consult with their treating physician.

**7. Should any patients who are receiving invasive surgery for a complex vascular anomaly be isolated for a specific period of time following their release from the hospital due to the threat of COVID-19?**

Answer: No special precautions unless exposed. If exposed, consult surgeon immediately.

**8. What precautions, if any, are warranted for patients with SWS who are taking anti-seizure meds regarding COVID-19?**

It is known that fever increases the risk of seizure so immediately consult SWS treatment specialist if exposed and if a fever is present. It is also important to continue all medications.

**9. What precautions, if any, are warranted for patients with KTS who are receiving wound care for open lesions if they or a caregiver are exposed to or diagnosed with COVID-19?**

Answer: No special precautions. Continue wound care. Whoever dresses wound should wear a mask and gloves.

**10. Will there be telemedicine options available for families affected by a vascular birthmark, anomaly, and/or related syndrome?**

Answer: Dr. Waner is offering telemedicine. Call his office at 212-434-4050 with questions/concerns.

**11. Are there any precautions for infants who are on a combined steroid/proporanolol treatment regimen?**

Answers: Steroids are an immunosuppressant. We don't know yet the comorbidity. Consult with treating physicians.

**12. If some of our patients contract COVID-19 and are given the proposed treatments which consist of possibly the chloroquine and/or azithromycin combo, do they have any concerns or precautions?**

Answer: There has been some cross reactivity with beta blockers. If the child is exposed you should discuss this immediately with your health care provider.

**13. Which treatments do you consider "non-essential"**

Answer: Treatments should remain on schedule, when possible.

**14. Many parents are worried about discontinuing laser at this time and losing ground by missing appointments. Will they be able to catch up? Will the delay in treatment impede clearance?**

Answer: They will be able to catch up. It may be a slight step back but they can catch up. They may require more treatments. Dr. Waner would like laser treatments to be continued, when permitted.

**15. There has been talk about not using Advil. Should patients who have pain with a vascular birthmark/anomaly or related syndrome also avoid Advil during this time and what would you recommend for daily pain management? Tylenol?**

A. We don't know for sure if Advil is contraindicated or not. Because there is some doubt, it's best to use Tylenol.