

Question 9 – September 30

An 8 year old has congenital hepatic fibrosis associated with polycystic kidney disease. He has marked splenomegaly and platelets are 60K. You explain the possibility of varices and risk for GI bleeding; parents ask if bleeding can be prevented. You reply:

- A. There have not been adequate randomized controlled trials in children to prove effectiveness of primary prophylaxis of variceal bleeding.
- B. Sclerotherapy is the treatment of choice
- C. Nitrates can be effective
- D. Propranolol is more effective in children because of age-related differences in the Starling curve
- E. The risk of bleeding before age 18 is trivial.

Answer: A

There is very limited data on the effectiveness of primary prophylaxis of variceal bleeding in children. When endoscopic intervention is indicated after a variceal bleed, endoscopic band ligation is preferred unless the infant is too small for the device; nitrates have not been studied in children. There is concern that propranolol may be less effective in children due to where their hearts operate on the Starling curve. Many children with extrahepatic portal hypertension bleed in childhood.

Reference:

1. Schneider B et al. Expert pediatric opinion on the Report of the Baveno IV Consensus Workshop on Methodology of Diagnosis and Therapy in Portal Hypertension. *Pediatr Transplantation* 2006;10:893-907