



CHILD ABUSE

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Definition :

- According to the World Health Organization (WHO), child abuse, or maltreatment, encompasses various forms of harm inflicted on children. This includes physical, emotional, or sexual abuse, neglect, and exploitation, whether for commercial purposes or otherwise. Such acts can result in actual or potential harm to the child's health, survival, development, or dignity. These harmful behaviors occur within a context where there is an imbalance of power, trust, or responsibility, typically involving individuals entrusted with the child's care. Essentially, child abuse refers to non-accidental physical, emotional, or sexual harm inflicted by caregivers or those responsible for the child.

Child abuse is classified into 1 of 4 major types:

- **Physical abuse** – Any non-accidental harm or injury caused to a child.
- **Emotional abuse** – Persistent emotional maltreatment, which can severely affect a child's mental well-being.
- **Sexual abuse** – Any involvement of a child in sexual activity, whether physical or through exploitation.
- **Neglect** – Failure to provide for a child's basic needs, whether emotional, physical, or educational.

Recognizing non-fatal child abuse is crucial, as timely intervention can help prevent its recurrence, which occurs in 60% of cases, and reduce the associated 10% mortality rate.

Causes of death in child abuse:

- Most child abuse-related deaths occur due to physical actions like hitting, beating, shaking, throwing, or dropping, while less frequent causes include burning or suffocation.
- Head injuries are the most common cause of death, followed by the rupture of internal abdominal organs.

History:

- The history provided by the parents or the child, often due to fear, does not align with the child's age, the severity, or the pattern of the injuries, indicating a mismatch (disexplanation).
- There may also be a delay in seeking medical treatment, and the adults involved may alter the history over time, creating further inconsistencies.

Physical examination:

- Should include the child's general appearance, vital signs, nutritional status, growth parameters (depending on concern for neglect or AHT consider height, weight and head circumference), Glasgow Coma Scale (GCS) score, an injury-specific examination (eg, extremities, neurological), and a **complete skin examination**.

1. Cutaneous injury:

Bruises

- are the most commonly reported potential sign of abuse in children evaluated in the emergency department (ED). Key areas to examine for bruising include the scalp, ears, eyes, oral frenula, neck, torso, bottom, and inner arms and legs. Bruises may present alone or alongside deeper injuries such as fractures or head trauma.
- While mobile children typically bruise over bony prominences (e.g., shins, forehead, knees), certain bruise patterns may indicate abuse. Inflicted bruises are significant red flags and should not be overlooked, though it is not possible to accurately age bruises based on color during clinical examinations.
- Bruises on male genitalia may suggest either physical or sexual abuse, and a thorough history is required to differentiate.

TEN-4-FACESp

Bruising Clinical Decision Rule for Children < 4 Years of Age

When is bruising concerning for abuse in children < 4 years of age?
If bruising in any of the three components (Regions, Infants, Patterns) is present without a reasonable explanation, strongly consider evaluating for child abuse and/or consulting with an expert in child abuse.

TEN

Torso | Ears | Neck



FACES

Frenulum
Angle of Jaw
Cheeks (*fleshy part*)
Eyelids
Subconjunctivae

REGIONS

4 months and younger



Any bruise, anywhere

INFANTS

Patterned bruising



Bruises in specific patterns like slap, grab or loop marks

PATTERNS

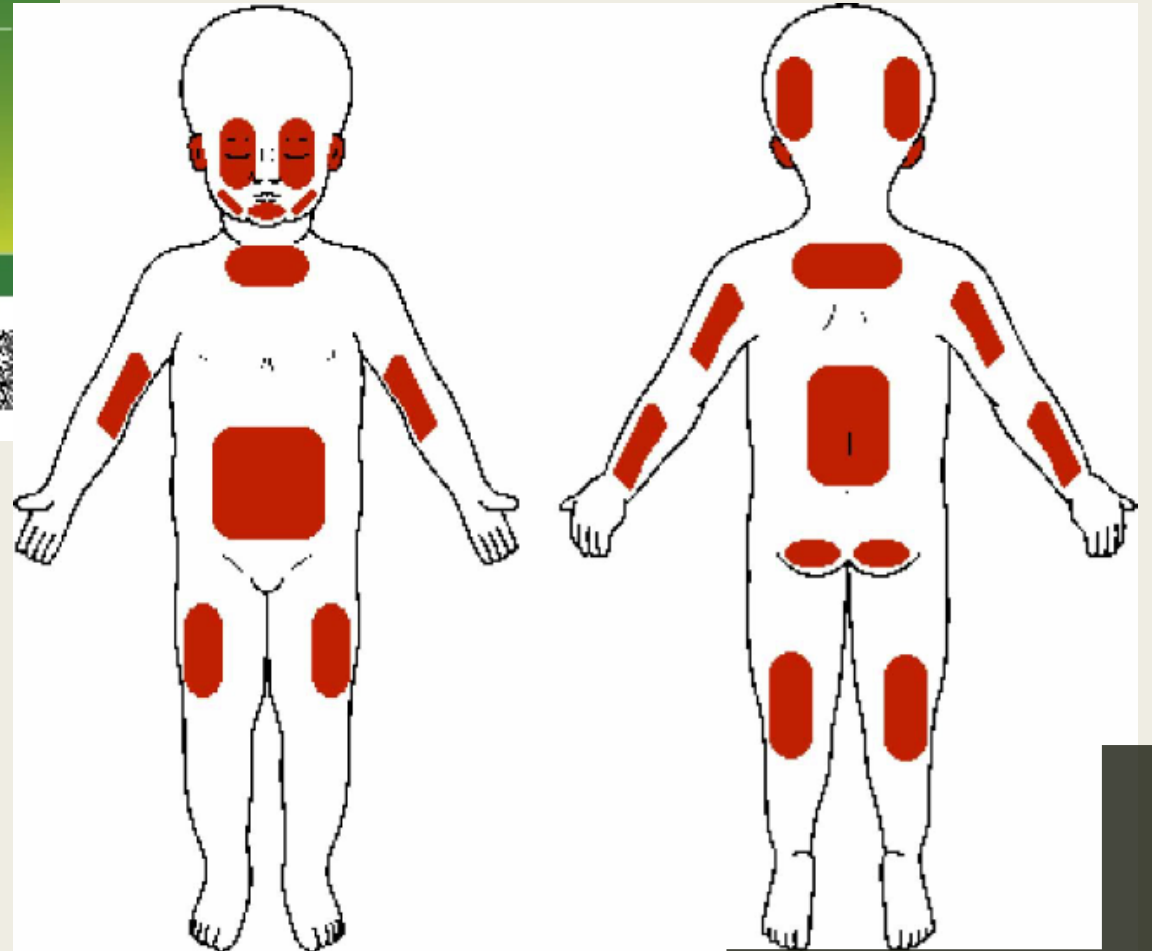
See the signs

Unexplained bruises in these areas most often result from physical assault. TEN-4-FACESp is not to diagnose abuse but to function as a screening tool to improve the recognition of potentially abused children with bruising who require further evaluation.

TEN-4-FACESp was developed and validated by Dr. Mary O'Leary Flann and colleagues. It is published and available for FREE download at pediatricsonline.org/ten-4-facesp.

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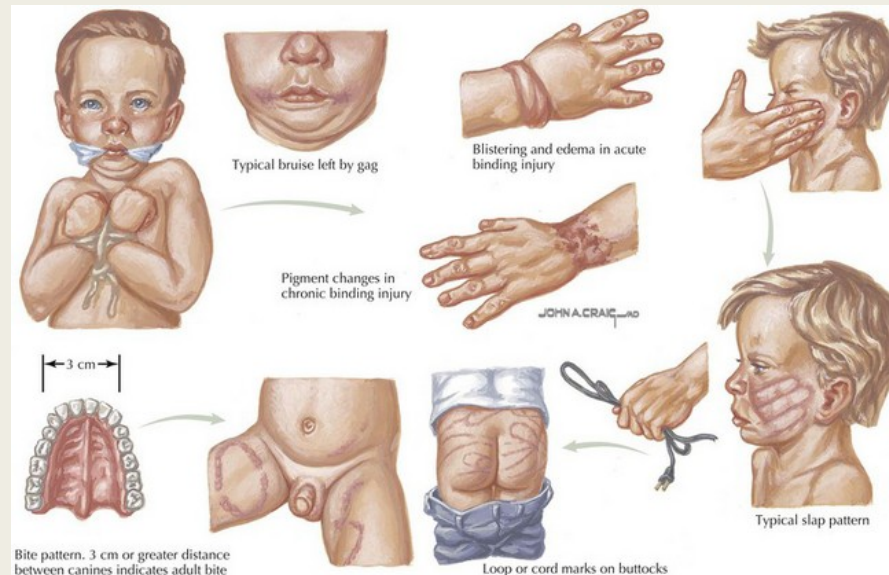


Suspicious bruise characteristics include:

- Bruises in non-mobile children, as children rarely bruise before they start moving independently (around 9-11 months).
- Bruises located away from bony prominences (e.g., inner arms, under the chin).
- Bruises on sensitive areas like the ears, neck, eyes, hands, feet, upper arms, abdomen, back, genitals, or buttocks.
- Multiple bruises of similar shape and size, especially if clustered or patterned (e.g., resembling a hand slap or object).
- Injuries on both the front and back or on both sides of the body (multiplanar).

These characteristics raise high suspicion of child abuse and should prompt immediate investigation.

- The age of bruises is a critical factor in child abuse investigations because it can reveal inconsistencies in the parent's account, raising suspicion of a non-accidental cause.
- Bruises of varying ages suggest multiple incidents of injury occurring at different times, which is a key indicator of ongoing abuse over a period.



2.Oral injury:

- Lip contusion and abrasion
- Frenulum tearing

3.Eye injury:

- Retinal hemorrhage

4.Head injury:

- Subdural hematoma
- Subgaleal hematoma

Battered baby syndrome :

- Also known as **shaken baby syndrome** or non-accidental trauma, refers to a serious condition in infants and young children caused by physical abuse. It typically involves repeated injuries, such as fractures, bruises, or internal damage, inflicted by caregivers or others responsible for the child. The condition often results from violent shaking, hitting, or other forms of forceful trauma. If untreated or undetected, Battered Baby Syndrome can lead to long-term physical and cognitive disabilities, and in severe cases, it may result in death.

The Shaken Baby Syndrome triad

Retinal hemorrhaging

Brain swelling

Subdural hematoma

ALBERTO CUADRA/
THE WASHINGTON POST

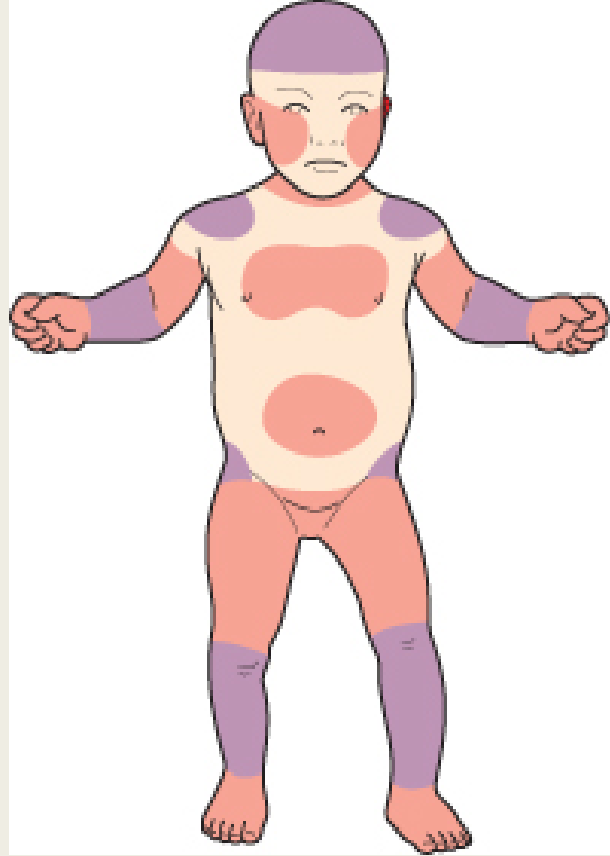


5.Skeletal injuries:

- Bucket handle fracture
(injury to the metaphysis which is the growing plate at each end of a long bone)
- Ribs fractures
- Spiral fracture in infant

6. Thermal injury:

- Inflicted burns in child abuse often result from hot-water immersion or contact with household items like irons or cigarettes, and in children under 2 years old, a skeletal survey is recommended to check for additional injuries.
- Intentional scald burns are usually caused by forceful immersion in hot tap water, are symmetrically located, and may be accompanied by other injuries, while accidental scald burns typically come from spills, with irregular borders or an arrow-shaped pattern.
- Inflicted contact burns often have a distinct pattern, occur in protected areas, and show uniform depth, whereas accidental contact burns are typically glancing, superficial, and found in unprotected areas.



- Abuse
- Accident



CHILD ABUSE



Sequelae of child abuse:

- Failure to thrive
- Decrease in psychomotor skills
- Learning difficulties
- Death

Thank you