Battered child syndrome symptoms and treatments



Battered Child Syndrome is a term used to characterize a clinical condition in which young children receive serious physical abuse, usually at the hands of parents or guardians. It wasn't until after 1962 that Battered Child Syndrome was recognized as a common syndrome. Historians believe that child abuse was just as prevalent centuries ago as it is today, but was rarely documented. The standard that constitutes child abuse varies greatly from culture to culture. It wasn't until the 1962 publication of the " The Battered-Child Syndrome" by C. Henry Kempe, a pediatrician, that society recognized this syndrome. (Wolff 2013)

Battered Child Syndrome presents as internal injuries, cuts, burns, bruises, and broke or fractured bones. There are times the abuse is so severe it can result in permanent damage or even death. There is usually a delay in bring the abused child to the emergency room and implausible explanations of the child's injuries. Incidences of Battered Child Syndrome are found more frequent in lower income households, these caregivers usually are under greater stress, have a lack of education, are a single parent, and have issues with alcoholism and drug addictions. Although, Battered Child Syndrome is more common in lower income families, it occurs at all levels of society. The abuse is most prevalent among step children, handicapped, first born, and infants younger than two years of age. Some other risks factors of abused children include; product of unwanted pregnancy, unwanted child in the family, low birth weight, separation from mother during neonatal period, habitual restlessness, incessant crying, and being physically unattractive. Risk factors of abusers are single parent, young, abused themselves as children, low self-esteem, unrealistic expectations of their child and

punishment oriented discipline. (Sciencedirect. com) The abuse rate of children is 25. 2 per 1, 000 children. Physical abuse of children accounts for 5. 7 per 1, 000, sexual abuse 2. 5 per 1, 000, emotional abuse 3. 4 per 1, 000 and neglect accounting for 15. 9 per 1, 000 children. All of these categories overlap, sexual and physical abuse usually occur together and physical or negligence rarely occur without emotional abuse. (Healthofchildren. com)

Medical Imaging can play a major role in diagnosing Battered Child Syndrome. A classic presentation in medical imaging is multiple fractures in various stages of healing. Fractures in children that are suspicious for abuse are fractures of the skull, spinous processes, posterior ribs, and sternum. Metaphyseal corner fractures cause by the twisting of a distal limb and pulmonary infiltrate without fever suggests lung contusion and are very suggestive of abuse. Nuclear medicine bone scans and skeletal surveys are helpful to detect other fractures or injuries. There are some conditions that can mimic the radiographic finding of Battered Child Syndrome and they include; osteogenesis imperfecta, scurvy, syphilis, among other diseases. Emergency room physicians, pediatricians, teachers and social workers are the most often the professionals to diagnose child abuse. (Sciencedirect. com)

A classic case of battered child syndrome reported was of a five year old boy who came into an outpatient clinic with pain and swelling in his forearm, bruising over his head and a wound over his left groin. The step father gave a very elaborate history of the boy's condition and how he came to have all these injuries. The child was further evaluated and medical imaging

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discovered a right humeral fracture that was not united properly, multiple scars all of his body from cigarette burns, and fractures of his ulna and radius that were in the process of healing. There were many signs of abuse in this case. The signs were multiple fractures in various stages of healing, a medical history that did not fit the injury, and cigarette burns all over the boy's body. These raised many red flags for the medical staff. The mother and other family members were counseled about the young boy's condition and advised on how to take the necessary legal actions. (Lakhansingh et. al. 2015)

Treatment of Battered Child Syndrome depends on the type of abuse and the injuries that have occurred. Some children can overcome the physical and psychological effects of abuse and cope with these negative experiences. Other children who don't have strong social support and resiliency can have physical, behavioral and emotional issues for many years after the abuse. Some physical signs abused children bear are premature death, physical disabilities, learning disabilities, substance abuse, and health problems. Behavioral issues that can be present in abused children include delinquent or violent behavior, abuse to others, withdrawal, suicide attempts, high risk sexual behavior, teen pregnancy, not finishing school, limited social skills, and problems with staying employed. Emotional Issues that can affect children who have been abused are low self-esteem, difficulty with relationships, issues with intimacy and trust, inability to cope with stress and frustrations, and accepting violence as a normal part of a relationship. (Child Abuse 2018)

Page 5

To prevent any more harm to the child, the child may be removed from the home. A government agency working with the court system determines the best decision for placement of the child and if the child will be returning home. Abusers are usually required to get counseling and in some cases are incarcerated. Abused children are usually recommended to have physical and psychological therapy to help recover from the abuse. The prognosis of Battered Child Syndrome is all dependent on the severity of the abuse and actions taken by authorities and parents to help themselves and children recover. (Healthofchildren. com)

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