

Doctor calls for 'shaken baby' strategy

Many victims are never diagnosed

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Shaken Baby Syndrome is a "preventable tragedy" that must be dealt with in a national strategy, says a leading CHEO pediatrician.

Dr. James King, CHEO's chief of pediatric medicine, reviewed a decade's worth of Shaken Baby Syndrome cases from 11 children's hospitals across Canada between 1988 and 1998.

In that time, 364 children were identified as suffering from that form of abusive head trauma -- 28 of them at CHEO.

Almost 20 per cent of victims died, Dr. King reports in today's Canadian Medical Association Journal. Of those who survived, about 55 per cent had neurological damage, including lifelong mental impairments. About 65 per cent had visual impairment.

And that is the tip of the iceberg, said Dr. King. There are probably many more children who suffer lifelong learning disabilities that are never diagnosed.

When Doris Lariviere of Orléans first met Jonathan, he was seven months old, completely blind and screamed all day long after he received a shaking at the age of 19 days.

He was almost five before he walked. Now, at 12, he is still legally blind, mentally handicapped and prone to fits of rage. He has cerebral palsy and still wears diapers.

"The parent who was the one he was supposed to love and trust did this," said Ms. Lariviere, who adopted Jonathan when he was three years old.

Jonathan's father, who was convicted of the attack that damaged his son so profoundly, was sentenced to four years incarceration.

"Jonathan was given a life sentence and no parole," said Ms. Lariviere. "It takes three seconds to cause the damage that Jonathan is living with. He will always be an adult child."

A baby's head is large, the neck muscles are weak and the brain is relatively loose, said Dr. King.

When the baby is shaken violently, the blood vessels can tear.

Babies who have been violently shaken have seizures, decreased consciousness, vomiting and loss of breathing.

But doctors have to be on the lookout for less severe cases, especially for children who are vomiting but don't have a fever, said Dr. King.

"The feeling is pretty consistent that there are a number of children who have more subtle signs," he said. "They're lethargic. They're slow feeding. It might be dismissed as a flu-like illness."



CREDIT: Brigitte Bouvier, The Ottawa Citizen

Doris Lariviere is the adoptive mother of 12-year-old Jonathan who suffered severe injuries as a baby when he was shaken.

Meanwhile, the condition costs -- not just for the time the child spend in hospital, but for extra care throughout the victim's life, he said.

Although one child in Dr. King's study was more than four years old, most of the victims were less than six months.

About 40 per cent of children went into foster care. There was history or evidence of previous maltreatment in 60 per cent of the cases, and 22 per cent of families had previous involvement with the child welfare authorities.

The perpetrator was identified in two-thirds of the cases in the study. Half the time, the father was the abuser, with another 20 per cent of the cases linked to a stepfather or male partner. The biological mother was identified in 12 per cent of the cases.

Still, the public is much more aware than they were decades ago, said Dr. King. So far, there have been two national conferences on the issue.

In November 2001, a joint statement made by eight bodies, including child welfare groups, the Canadian Association of Chiefs of Police, the Canadian Pediatric Society and the Canadian Bar Association, concluded that forceful shaking is child abuse and criminal assault.

Those identified as being more likely to injure children -- including young parents, men, caregivers and parents who are stressed or aggressive -- need to be cautioned, the statement said.

A series of national guidelines for investigating shaken baby cases is still in the works and should be released in the next few months.

The joint statement has helped those involved in prosecuting assaults against babies. In court cases, it helps establish that pediatricians, lawyers, police and social workers all agree that the syndrome exists. In the U.S., some prosecutions have been derailed by arguments that baby injuries and deaths were caused by falls, not shaking.

Ron Ensom, a former CHEO social worker who now does consulting working on Shaken Baby Syndrome, says a little bit of jiggling -- or even a fall -- can't produce the syndrome.

"Babies are robust critters," he said. "It takes substantial injuries to derail their brains. Children are dropped a thousand times a day and most are just fine."

Mr. Ensom would like to see public service announcements that remind people never to shake a baby.

"Kind of like the message, 'never drink and drive'," he said. "And if you're feeling frustrated or angry, have a coping plan. Put the baby in a crib, close the door and walk away. You need a break more than the baby."

Dr. King urges caution. "First, people have to be very cautious about how they handle babies. They also need to be cautious when they choose a caregiver," said Dr. King. "They have to feel that their caregiver is a safe person and someone they have trust in."

A baby cries for an average of two hours a day. "Parents need mechanisms where they have support," he said. "You can walk out if you're feeling frustrated."

In recent years, Ms. Lariviere has become an advocate for preventing Shaken Baby Syndrome. Jonathan has made small, but hard-gained advances. He can see a little. Medication has helped reduce his rages.

Ms. Lariviere recalls the day Jonathan got his first white cane at 10 years old.

"I looked at him and thought, 'It's so wrong. It's not something that happened naturally. I should be putting a hockey stick in his hand'."

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