

”Consensus statement on abusive head trauma in infants and young children”

DPS' bestyrelse har efter anbefaling fra Socialpædiatrisk Udvalg besluttet at støtte et statement publiceret af Choudhary et al. i *Pediatric Radiology* 2018 (1). Dette statement er indtil videre støttet af 15 forskellige videnskabelige selskaber i USA og Europa.

Der har de sidste par år i fagmiljøer været meget diskussion af validiteten af diagnosen Abusive Head Trauma (AHT) og Shaken Baby Syndrome, selvom talrige videnskabelige selskaber i Europa, USA og Canada i 2011 havde bekræftet validiteten af de diagnostiske kriterier (2). Pga. af de meget alvorlige, særligt neurologiske, følger af vold mod hovedet er den diagnostiske afklaring af stor betydning for børns velfærd, beskyttelse og retssikkerhed - og derfor af relevans for DPS.

Debatten er intensiveret på baggrund af en rapport i 2016 udarbejdet af det svenske ”Statens Beredning för medicinsk och social Utvärdering” (SBU). Formålet med rapporten var iflg. forfatterne at undersøge om ”shaking” alene kan afstedkomme ”*Triaden*” defineret som: Subduralt hæmatom (SDH), retinale hemorragier (RH) og encefalopati. SBU finder, at der ikke er tilstrækkeligt bevis for, at denne triade kan opstå på baggrund af ”shaking” alene. Rapporten og efterfølgende review er kritiseret af talrige velanskrevne forskere i USA og Europa for alvorlige fejl og mangler, uden at SBU har ændret noget (3,4). Rapporten er allerede blevet brugt af forsvarsadvokater i flere lande til at rejse tvivl om diagnosen AHT, hvilket giver anledning til alvorlig bekymring for retssagers forløb, men ikke ændrer ved vedtagne diagnostiske procedurer.

Danske socialpædiatere har aldrig baseret diagnosen ”abusive head trauma” alene på denne triade af kliniske fund, men må med foreliggende viden fastholde, at triaden giver anledning til begrundet mistanke om AHT. Det skal også i denne sammenhæng understreges, at ingen til dato har fundet nogen medicinsk alternativ forklaring, når de tre fund i ovennævnte ”triade” er til stede.

De 11 konklusioner i statement i *Pediatric Radiology* 2018:

- 1. Abusive head trauma (AHT) is the current most appropriate and inclusive diagnostic term for infants and young children who suffer from inflicted intracranial and associated spinal injury. This does not negate the mechanisms of shaking or shaking with impact as a significant mechanism of injury but merely indicates that the term “shaken baby” is not all-inclusive.**
- 2. Lack of history, changing history or the incompatibility of history (i.e .short falls) with the severity of injury raise concerns for possible AHT.**
- 3. Relatively few infants with AHT have isolated intracranial injury without retinal hemorrhages, fractures or other manifestations of child abuse. These children need a comprehensive evaluation to rule out other diseases. However, isolated intracranial injuries occur in a small percentage of children with AHT.**
- 4. No single injury is diagnostic of AHT. A compilation of injuries most often including SDH, complex retinal hemorrhage and/or retinoschisis, rib, metaphyseal or other fractures and soft-tissue injury leads to the diagnosis.**

5. Each infant suspected of suffering AHT must be further evaluated for other diseases that might present with similar findings. The question to be answered is, “Is there a medical cause to explain the findings or did this child suffer from inflicted injury?”
6. There is no reliable medical evidence that the following processes cause the constellation of injuries associated with AHT: cerebral sinovenous thrombosis, isolated hypoxic–ischemic injury, lumbar puncture and dysphagic choking/vomiting. There is no reliable evidence to support speculation that long-term consequences of birth-related subdural hematoma can result in later collapse, coma or death from acute rebleeding into a previously asymptomatic chronic subdural hematoma. In addition, subdural hematoma is uncommon in the setting of benign enlargement of the subarachnoid space, and when present, AHT should be considered in the differential diagnosis.
7. After medical diagnosis, in many hospitals a multidisciplinary team provides comprehensive assessment and services to the family, based on consideration of all the facts.
8. There is no controversy about the methodology used to diagnose AHT as a medical disease.
9. AHT is a medical diagnosis unrelated to the legal determination by a judge or jury of a charge of murder. The term “triad” is a legal convention that falsely mischaracterizes a complex AHT diagnosis process.
10. A professional medical society’s consensus statement educates judicial factfinders, the news media and the public about “general acceptance,” what is accurate medical information and what is non-evidence, speculative or professionally irresponsible etiological hypotheses.
11. The professional societies’ consensus statement on AHT should help the court recognize unsubstantiated medical expert testimony.

DPS anbefaler, at danske pædiatere, der beskæftiger sig med børn med hovedtraumer, læser artiklen. For spørgsmål og yderligere referencer kan socialpædiatrisk udvalg kontaktes.

Referencer:

1. Choudhary AK, Servaes S, Slovis TL, Palusci VJ, Hedlund GL, Narang SK, Moreno JA, Dias MS, Christian CW, Nelson MD Jr, Silvera VM, Palasis S, Raissaki M, Rossi A, Offiah AC. (2018) [Consensus statement on abusive head trauma in infants and young children](#). *Pediatr Radiol.* Aug;48(8):1048-1065. doi: 10.1007/s00247-018-4149-1. Epub 2018
2. Narang S. (2011) A Daubert analysis of abusive head trauma/shaken baby syndrome. *Hous J Health L pol’y* 11:505-633
3. Lynoe N, Elinder G et al. Traumatic shaking. The role of the triad in medical investigations for traumatic shaking:
https://www.sbu.se/contentassets/09cc34e7666340a59137ba55d6c55bc9/traumatic_shaking_2016.pdf
4. Geoffrey David DeBelle, Sabine Maguire, Patrick Watts, Rosa Nieto Hernandez, Alison Mary Kemp, On behalf of the Child Protection Standing Committee, Royal College of Paediatrics and Child Health (2018) Abusive head trauma and the triad: a critique on behalf of RCPCH of ‘Traumatic shaking: the role of the triad in medical investigations of suspected traumatic shaking’. *Arch Dis Child* 0:1-5.