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## Battered Child Syndrome –A Case Report

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### Abstract

*In battered child Syndrome, the child is abused physically and he has fractures of multiple bones in different stages of fracture healing. We are reporting a child of 5 years age with multiple cigarette burn marks all over body which are rarely reported along with fractures of bones in various stages of healing.*

**Introduction:** *Battered child syndrome is a social problem. It is the responsibility of the physician beside medical treatment of the battered child to identify it and ensure action to prevent repetition of injury .All the necessary action should be taken to avoid disability of the child.*

**Keywords:** *Battered child, fractures, cigarette burn, syndrome, abuse.*

### Case report

A five years old male child reported in our outdoor patient department with pain and swelling in left forearm, wound over left groin and skin bruising over head. History of injuries by his step-father was elaborated. Child was further examined and malunited right humerus was found with multiple healed scar marks of cigarette burn over

his body. On Xrays examination fractures in radius and ulna were seen and also with callus formation that was the contrary to history of recent injury. We counseled his mother and other relatives about his condition and advised them to take necessary legal action. The child was treated with plaster and wound dressings.



**Fig 1** child showed malunited humerus Right side and plaster slab for fracture both bone forearm left side



**Figure 2** Multiple healed scar marks of cigarette burn over back



**Figure 3** Cigarette burn mark over groin



**Figure 4** Bruise over head

### Discussion

The term battered child syndrome was first used by Kempe et al in 1962. Clinical features of battered child syndrome are fracture of bones with multiple stage of healing, skin bruising, subdural haematoma and failure to thrive. It should be identified when nature of injury is different with history given regarding occurrence. Kempe et al also emphasized the unwillingness of medical professional to accept and diagnose the condition and also to take protective action.<sup>1,2</sup>

For that appropriate imaging modalities like X rays, CT Scan, MRI and bone scintigraphy should be used to assess visceral injury, head injury and fractures.<sup>3,4,5</sup> In our case we did skiagram only as there are no visceral or head injury clinically. It is the responsibility of the nation to avoid neglect of battered child.<sup>6</sup> Michael et al reviewed the literature about child abuse by burning from 1966 to 2000 and formulated an algorithm plan for medical investigation.<sup>7</sup>

Multidisciplinary collaboration is needed to take combined effort to address the medical, psychosocial and legal aspects of the problem of battered child.<sup>8</sup>

### Conclusion

The responsibility of the physician is not only the treatment of battered child but also he should take necessary social and legal measure to protect them.

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