

## New York Shaken Baby Prevention Program

Fall 2011



*Saving babies' lives one family at a time*

### *Special points of interest:*

- SBS Program presents poster at Annual NYS conference.
- San Francisco AHT Conference a success
- SBS 2011 supplies coming soon
- Abusive Head Trauma study in PEDIATRICS

### *Did you know?*

1. The 12th International Conference on SBS in Boston will be Sept. 2012
2. Work is underway for an updated video.
3. The Upstate area hospitals boast an 85-90 percent commitment statement return rate
4. 2011 end of year nurse manager survey will be conducted soon.

### *NYS Child Abuse Prevention Conference*

April 11 -13, 2011 in Albany, NY the New York Shaken Baby Prevention Program presented at the New York State Child Abuse Prevention Conference. Updated information on the program's success and how to implement such a program in other communities was provided. Kathy and Kim delivered a poster presentation on "Shaken Baby Syndrome Education: Nurses Making a Difference". Their presentation highlighted the crucial role nurses play in the success of the program. Now approaching 13 years of sustainability, expansion and success, the New York Shaken Baby Prevention Program is now in every hospital that delivers maternity care in New York State.

### *3rd International Conference on AHT*

Mark Dias, MD, Pediatric Neurosurgeon, Professor of Neurosurgery presented at the Third International Pediatric Abusive Head Trauma Conference held July 7 & 8, 2011 in San Francisco, California. This research based conference provided a unique opportunity to bring together physicians, nurses, researchers, forensic scientists, engineers, and others from a wide range of disciplines to share their research efforts, discuss research challenges and controversies in the field. This will help develop cross-disciplinary collaborations to further advance our understanding of abusive head injuries.

### *2012 Educational Materials Delivered Soon*

**It is that time again!!** Within the next month you will be receiving your 2012 supply of commitment statements, informational brochures and return envelopes. If you need a new video/DVD or poster please let us know. We will call you to see if you received your materials. If you have any questions call us at 716-878-7441.



## **Evaluating the Relationship Between the Economy and the Rate of Abusive Head Trauma**

Data collected at Children's Hospital of Pittsburgh of UPMC (CHP) was recently part of a multi-center study which evaluated the relationship between the rate of abusive head trauma (AHT) and the economy. As part of this study, which was funded by the Matty Eappen Foundation, data were collected about all cases of unequivocal AHT in a 74-county region of four states: Washington, Ohio, Kentucky and Pennsylvania. The PA region included the 23-county encatchment area of CHP. All children <5 yr of age who were diagnosed with AHT between 1/1/04 and 6/30/09 were included in the analysis. The economic recession officially began 12/1/07 and ended 6/30/09. In addition, data were collected about the number of children <5 yr who were admitted with non-inflicted TBI (e.g. accidental TBI) during the same time period.

The study was performed, in part, because of numerous articles in the lay press which had suggested that there had been an increase in the amount and severity of physical abuse since the start of the recession. This anecdotal information, however, was in contrast to the 2008 and 2009 Annual National Reports on Child Maltreatment which both reported a decrease in child maltreatment and specifically a decrease in child physical abuse.

For each subject in the study, demographic information including county of residence and clinical data were collected. Quarterly unemployment rates were also collected for all counties in the 74-county encatchment area.

A total of 422 children with AHT were identified at the four sites during the 5½-year study period. More than 100 of these children were from Western PA. Analysis of the data using a Poisson regression analysis demonstrated that the rate of AHT increased significantly during the recession compared to the pre-recession period for each region individually and for the 74-county collective region. The overall incidence rate ratio for the recession was 1.65 (95% CI, 1.60-1.69) which means that the chance of sustaining an AHT during the recession was 1.65 fold higher than before the recession for the entire 74-county region.

In the 23-county region of Western Pennsylvania, the overall rate of AHT in children <5 yr of age increased from 8.7 (95% CI: 6.6-10.8) per 100,000 to 20.8 (95% CI:15.6-25.9) per 100,000, while the rate in children <1 yr of age increased from 46.0 (95% CI: 33.5-58.6) per 100,000 to 61.7 (38.0-85.4) per 100,00. There were no differences in mean age, mortality, insurance status, proportion of children without siblings or proportion of children with evidence of previous abuse during the recession compared with the pre-recession period. There was also no increase in the number of cases of non-inflicted TBI at Children's Hospital of Pittsburgh during the recession compared with the pre-recession period. Although unemployment increased during the recession in all three regions there was no association between AHT rates and county unemployment rates.

The results of this study is currently published in the journal PEDIATRICS and demonstrated a marked increase in the rate of AHT during an economic recession in three distinct geographic regions encompassing a total of 74-counties and including a large region of Pennsylvania. If other regions of the country have seen similar increases, this corresponds to hundreds, if not thousands, of excess AHT cases. Given the acute and long-term costs of caring for children with AHT, the result of this study may have policy implications for resource-allocation for AHT during a recession as well as clinical implications for medical professionals who make decisions about when to evaluate for AHT. The stark contrast between the results of this study and national as well as state data related to the rate of physical abuse is also disconcerting and requires further evaluation. The results also suggest that future research may focus on identifying triggers for AHT which might be specific to times of economic hardship and which may be amenable to intervention within the economic environment of a recession.

Results from this study were published online September 19, 2011 in PEDIATRICS by Rachel P Berger MD, MPH from the Child Advocacy Center/Children's Hospital of Pittsburgh of UPMC Co-investigator CDC Abusive Head Trauma Grant/PA Shaken Baby Syndrome Prevention & Awareness Program.

### **For further information:**

New York Shaken Baby Prevention Program

Women & Children's Hospital of Buffalo

of Kaleida Health

716-878-7441 or [www.wchob.org/shakenbaby](http://www.wchob.org/shakenbaby)

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