



### F31 Child Abuse: A Pediatric Perpetrator

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After attending this presentation, attendees will understand the dynamics of various types of pediatric bite marks and the resultant characteristic wound patterns. This presentation will familiarize practitioners with the recognition of rarely documented pediatric bite marks on human skin.

Human bite marks are not uncommon in sexual assaults and/or homicides. Bite marks on human skin are pattern injuries, usually in a double arch pattern. They have class characteristics that identify them as human bite marks, and individual characteristics that can relate to an individual dentition. The individual characteristics may be analyzed to include by points of concordance or exclude by dissimilarities the identity of the perpetrator. The accuracy of these conclusions are influenced by many factors,

i.e. clarity of the bite mark, accuracy of the photographs (focus, scale, light source) and age of the bite mark.

It is quite uncommon to see bite marks inflicted by the pediatric age group.

On May 5th, 1999, I was asked by our Child Protection Team to evaluate what appeared to be human bite marks on a young child. On May 6th, I examined and extensively photographed one Brittany G.; a cheerful, active 14-month old girl. Present were her mother Gail, Katherine Keeley, MD, Sarah Crane of the Child Protection Agency, and Glori Enzor, DDS.

Brittany resides with her single mom in Arcadia, Florida, in rural DeSoto County. She had been dropped at her babysitter's home at 8 a.m. and her mom, upon picking her up at noon after her work, noticed the bite marks and called authorities. Only Brittany, the babysitter, and the sitter's 2-year-old son were present in the house during those hours.

The bite marks were documented with and without an ABFO #2 scale. Slides, color and black and white photos were made using Kodak T-Max 400, Kodak Tri-Max 400, Kodak Elite 400, and Kodak Gold 200 film.

There are a total of 19 bite marks: one on the left face; two on the posterior shoulder; two on the right arm and forearm; eight on the back; two on the right buttock; two on the left buttock.

The arch form and measurements indicated that these were made by a deciduous dentition.

The bite marks were forceful enough to cause both abrasions and contusions. All appeared to be in a similar stage of healing. Nine of the bite marks appeared to be double bite patterns. This occurs when two bites are inflicted very quickly in the same location, or the skin slips and the teeth quickly contact a second time.

The bite marks on the buttocks could not have been inflicted through a diaper. Brittany's mom stated that to her knowledge, Brittany did not in the past remove her own diaper.

No exemplars or interviews were made of the 2-year-old son. Unfortunately, due to funding constraints or inertia, to my knowledge there has been no follow-up on this case.

Quoted from the report, the facts of the number and force of the bites, in addition to the probable removal of Brittany's diaper, certainly raises warning flags. The suspected biter should be carefully followed for further aberrant behavior, with intervention and counseling should the facts so warrant.

#### Child Abuse, Bite Marks, Pediatric