



Pathology Biology Section – 2006

G11 An Unusual Death of a Child at the Obstetrician's Office

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After attending this presentation, attendees will be presented with a case of a 13-month-old child who died after his pregnant mother accidentally fell on him while she was at her obstetrician's office. The goal of this presentation is to illustrate the severity of injuries that may result from such a seemingly innocuous event.

This presentation will impact the forensic community and/or humanity by increasing awareness of the potential for fatal injuries in a case where the severity of injuries was in excess of what might have been expected given the history and, had the event not been witnessed, might have been mistaken for child abuse.

A witnessed case of a 13-month-old child whose mother fell on top of him at her obstetrician's office is presented, resulting in severe head injuries that, under different circumstances, might be mistaken for abuse.

A 31-year-old, 5-foot 8 inch, 180-pound woman in her 8th month of pregnancy was at her obstetrician's office with her two children, a 3-year-old girl, and a 13-month-old boy. While the woman was being weighed on a scale, the 13-month-old boy walked behind her. Not noticing her child behind her, the woman stepped backward off the scale and onto her child, losing her balance and falling on top of the boy. According to a statement to police, her "tailbone hit her son's head." The height of the scale was 4 inches from the carpeted floor. The event was witnessed by the doctor's nurse; whose statement corroborated that of the mother's and further indicated that the left side of the boy's face was down against the carpet when his mother landed on him.

The boy, who immediately became unresponsive, was taken to the hospital where his Glasgow coma scale on arrival was 4-5 and he was exhibiting decerebrate posturing. Computed tomography scans of the head showed a depressed frontal skull fracture, bilateral subarachnoid hemorrhage (left greater than right), left subdural hematoma (without midline shift), and elevated intracranial pressure. No funduscopic examination was performed. Despite medical intervention, he died the next day and was brought to the Harris County Medical Examiner's Office for autopsy.

At autopsy, external examination revealed diffuse, right-sided scalp hemorrhage and right periorbital ecchymosis. Internally, a gaping 7-1/4" linear skull fracture involved the parietal skull bilaterally, anteriorly extending to and involving the coronal suture. Dura and brain matter herniated through the fracture. Approximately 20 milliliters of subdural hemorrhage were present bilaterally (right greater than left). Bilateral parasagittal subarachnoid hemorrhage and bilateral tonsillar herniation were also present. Coronal sections revealed contusions of the right frontal and parasagittal contusions. No other injuries were noted.

In the United States, an estimated 1,400 deaths due to child neglect and abuse occurred in 2002; of these, 30% were due purely to physical abuse. The majority of pediatric homicides occur within the first two years of life, and the cause of death most commonly involves blunt force injuries to the head or abdomen. Typically, fatal injuries in children do not occur as a result of minor mishaps during ordinary activities of daily living. The discrepancy between the history provided by the caregiver and the severity of the injuries themselves is often the initial indication of abuse. Such stories may describe the decedent rolling off of a bed, falling from the arms of the caregiver, or the caregiver falling while carrying the child. Had the events described in the case above not taken place at the doctor's office and been witnessed, the "discrepancy" between the story and the severity of the injuries sustained by the decedent would likely have raised serious suspicions of child abuse.

Fall, Head Injuries, Child Abuse