



CASE REPORT

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Chronic abuse of the three brothers and negligence up to the level of cachexia – case report

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Abstract

In this study; a case about three brothers exposed to long-lasting severe neglect and abuse up to cachexia and severe depression will be presented and discussed in the light of the literature data. It was learned from the statements of the suspect, mother and child victims that father worked at night shift, that a distant relative who began to live at their home to help with the expenses of the house for the last three years, had sexual and emotional relationship with the mother during the day, that although this person act well in the beginning but in time he left the three children hungry for several days in order to punish, hang them to the ceiling from their hands and feet, used physical violence like punch, beatings, extinguished illuminated cigarettes in their bodies, made skin burns by using a lighter and that father and mother turned a blind eye even knowing all that for a long time. It was reported that one day a second suspect who was brought by this suspect and stayed at home with them for two months, took the children into the bathroom with the purpose to wash them and that he applied anal sexual abuse to the younger child at the age of three years. In the examination it was determined that the four years old youngest brother was highly cachectic, unable to stand, unable to sit, lied constantly, had difficulties in talking, had decreased skin turgor and tone, was cachectic, had bruises, burns, scars in different parts of the body at different ages and an old fracture in the mandible was seen in the radiography. The 9-year-old middle brother testified likewise and strained and swollen appearance of abdomen, growth retardation, extensive bruising also on both cheeks and at the rear of the right thigh were determined in the examination. Ecchymosis and hematoma in both cheeks and left auricula was detected on the 11-year-old oldest brother. After a detailed evaluation it was found that the child was admitted to the hospital due to a fall, four years ago, due to activity and attention disorders six and four months ago. It is remarkable that child abuse and neglect incident was not detected in the examinations done at the hospital before.

Keywords: Child abuse and neglect, protection of children's rights, malnutrition, cachexia

Introduction

Child abuse and neglect is an important public health problem that can lead to life-long health problems in their victims [1]. Many studies and platforms emphasize the need for a comprehensive and collaborative public policy on the prevention of child abuse. The reasons are multidimensional, and the results are tragically affecting our children and therefore all of our society. Despite all the progress in this regard, the problem still remains its prevalence and seriousness. Moreover, an effective and adequate protection system is still not yet fully achieved in our country and in the world [1,2].

World Health Organization has announced that “Exposure to all kinds of attitudes and behaviors including commercial advertising or any other form of influence that may cause any physical and / or emotional, sexual, negligence or neglect to cause adverse effects on health, growth and development of children, should be considered as child abuse” [3]. Child abuse can often be categorized as physical, sexual, emotional abuse, and neglect, although they often appear in more than one form [3].

Physical abuse, in the broadest sense is a non-accidental injury in children. The possibility of physical abuse in every child with injury should be considered.

Sexual abuse, with the most general definition, is the use of a child who did not complete psychosocial development, for sexual stimulation by adults [3].

Emotional abuse is the exposure of children or adolescents to verbal threat, ridicule or humiliating interpretations, comments that threaten their emotional or spiritual health [2,4].

Neglect is the failure to provide physical care such as nutrition, security, education, medical treatment or emotional needs such as love, support, interest, emotionality, decency, affiliation [2,4]. This kind of abuse can come with physical results (malnutrition, cachexia), can be seen as emotional and / or medical neglect and can result with even death [2,4].

It is known that physical abuse is the most common and the easiest to identify, and that emotional abuse and neglect are quite common but have difficulty in being recognized, identified, and legally proven [1]. Although negligence is reported at least frequently in

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the reports of the Conservation Units, neglect is often accompanied by varying degrees to other types of abuses [5]. In the researches on child abuse in Turkey, in close proximity to US-origin data; It was found that emotional abuse and neglect were the first place with a high rate of 78%, physical abuse was seen 24% and sexual abuse was 9% [1,6]. Children in every age group can be victims of abuse, but studies suggest that girls are found to be more common than boys [3,6]. Economic inefficiencies, broken families, parents' diseases, domestic violence, migration are among the factors that lead to child neglect and abuse [1,3].

Convention on the rights of the child adopted by the United Nations General Assembly in 1989; is the most important international legal commitment of child protection system and child care practices [3].

The Constitution of the Republic of Turkey and the Turkish Civil Code, Social Services and Child Protection Agency Law No. 2828 (The name was changed to the Social Services Act by the Decree Law dated 03.06.2011) and Child Protection Law No. 5395 are important for the protection of the child in our country. It is also seen that some regulations have been made together with the Turkish Penal Code and Law No. 6284 on Protecting the Family [7].

In this study; three brothers with health problems leading to cachexia and severe depression due to environmental factors such as problematic family structure and inappropriate living conditions will be presented and discussed in the light of literature data.

Case Report

While living in a province in the Southeastern Anatolia the family migrated to a touristic sight near the sea four years ago. Father (37 years old, literate, no social security) works at night shift. The mother (33 years old, junior high school graduate, has social security) entered the job as a seasonal cleaner at a hotel because the family suffered from subsistence problems. The family who lives in a slum-type two-room rental house, does not have a regular monthly income in the long run. Incompatibility has been defined between parents with kinship ties for four years. The boss of the father told that he hired him for help, because he was a poor and spoofable person. The father accepted a 26-year-old male with a distant relative from his hometown, who did not have a regular job, to his home three years ago in order to contribute to the cost of the house. It has been learned that the accused contributed to the cost of living and treated the children well in the beginning but, in time, he started sexual and emotional relationship with the mother when father went to work, he left the three children hungry for several days in order to punish, hang them to the ceiling from their hands and feet, used physical violence like punch, beatings, extinguished illuminated cigarettes in their bodies, made skin burns by using a lighter and that father and mother turned a blind eye even knowing all that for a long time. It was reported that one day a second suspect who was brought by this suspect and stayed at home with them for two months took the children into the bathroom with the purpose to wash them and that he applied anal sexual abuse to the younger child at the age of three years.

Because the boss of the father reported the situation and helped the father in the judicial procedure, the father took his children and went to the police and told them what happened. Then the

mother on her own request, was placed in the Women's Shelter, children who were taken to Social services dormitory were sent to our Child Watch Center at different times for examination.

Youngest Brother Case

Our first case, the most severe of the three brothers, four years old youngest brother, was brought to our Child Watch Center as severe cachectic and with difficulty in standing and sitting. At our center, it was observed that after the first treatment and resting, the interviewee had difficulty in speaking, and that his speech was difficult to understand. The mother told once that the second suspect had put her youngest son when he was three years old in the bathroom to wash him and that after a while crying voices and screams had been heard, after the bath when she had asked the reason of his crying, he had told her that he was undergone anal abuse. The boy gave a statement similar to his mothers.

On detailed physical examination; The child was found to be seriously cachectic, when viewed from the outside the bones could be seen clearly under the skin, turgor and tonus on the skin was decreased, ecchymosis and hyperemia on the skin where the bones met the hard ground, in the sitting or lying position was detected because of the loss of subcutaneous fat tissue, brown peeling of the skin in various places on the skin, ecchymosis at different ages on frontal region with a size of 8x5 cm, on both cheeks and around the left eye, on both foot dorsal faces about 10 cm in diameter was seen, burn scars in numerous and different sizes on both of the back of the hands and inside the arms, 0,75 cm in diameter extinguished cigarette burns induced scars one in the left forearm midline inner face, two to three in both popliteal regions were observed. An old fracture in the mandible was seen in the radiography. While there was no unusual finding in the genital examination, taking into account the time interval, medically it was not meaningful that the findings were not detected, it was concluded that the mother and the child's statements in this direction were sincere.

Middle Aged Brother Case

The 9-year-old brother said that the first suspect who had been living in his home for three years, had mistreated him and his brothers, had left the three children hungry for several days in order to punish, hang them to the ceiling from their hands and feet, used physical violence like punch, beatings, extinguished illuminated cigarettes in their bodies, made skin burns by using a lighter, also stated that the second suspicion, who lasted for 2-3 months in their home, was behaving in the same way, and exploiting his younger brother in anal way. In the examination, a distinctive xerosis cutis on the arms and legs, tense and swollen appearance in the abdominal area, growth retardation, also widespread ecchymosis on both cheeks and right thigh posterior was identified.

The Oldest Brother Case

In the examination of the 11 year old brother, widespread ecchymosis on both cheeks and left ear pouch, a 10x2x3 cm hematoma at the back of the head were found. Under the detailed evaluation it had been understood that, the child was referred to the emergency service with the reason of "falling" four years ago, six and four months ago, he was referred from the school and examined at the Children's Psychiatry Clinic, where he was diagnosed with activity and attention deficit disorder. A detailed social survey was requested after the preliminary interviews and examinations made for the cases whose physical, mental and social development were

significantly backed by their pers, the first step for the treatment and rehabilitation was taken by referring the child to the Children's Health and Diseases Clinic and Children's Psychiatry Clinic. It was ensured that the children were placed in the dormitories of Family and Social Policies Provincial Directorate and they were allowed to continue their education life. In the ongoing process, brothers' health problems and adjustment problems in school life have been observed and follow-up and treatment are still continuing.

Discussion

The fact that child abuse is often carried out by family members or close relatives makes it difficult to recognize child abuse [8]. In addition, the most common occurrence in the first three years after birth also makes it difficult to identify these small individuals who are unable to express themselves and take part in community life [8].

Child abuse and neglect are more common when there are some risk factors. In child abuse and neglect; Complex interaction involving children, carers and environmental factors play role [1]. Although all children are affected, age, ethnic and socio-demographic backgrounds, security incidents and special circumstances (children with special needs, toilet training, colic, etc.) can trigger mistreatment [1,9].

Factors that reduce parents' ability to cope with stress include low self-esteem, impulse control disorder, and substance abuse. Young, poorly educated and mentally ill parent are other parental characteristics for maltreatment [1,8,9]. In this presented case; economic difficulties in the family, low education and low self-esteem in parents, discord, has created a risk for abuse and neglect of children. In addition, the parent who has been subjected to maltreatment during childhood is considered as an important risk factor in the literature [1,8]. From the detailed history and the family interview, it was understood that the mother and father were neglected from the young age. Despite the fact that all these features are in the family of the victimized children, the lack of a social support system is a reflection of one of the most important factors increasing the risk.

Poverty and unemployment are among the most important risk factors for abuse in the literature [1,8]. In this presented case, migration to a city in a culture completely different from the city where they were born and raised in the southeastern culture, living an isolated life in this city without any relative or friend, the recent years in poverty during new life adaptation are among the factors that play a part in the neglect of children.

The application of severe physical, emotional, sexual abuse and negligence by two foreign men staying at their home, to these children who were already neglected by their family, has made a summit with the cause of immigration and social destruction brought about by immigration.

Pathognomonic findings in child physical abuse are wide ecchymotic areas with different colors and different healing periods and bone fractures that have occurred at different times in different healing stages [10]. In addition, bites, burns and especially cigarette burns are very important and should be taken into account [9,10]. Ocular findings, rectal and vaginal injuries and bleeds, abdominal findings can also be observed in child abuse [9]. In particular, the youngest

brother case has a pathognomonic feature with the anal sex story, the old mandibular fracture, the scars belonging to the cigarette burn, the ecchymoses of different ages in different parts of the body and the cachexia. The case was found to be in a dramatic cachexia caused by severe malnutrition. It is understood from the expressions of the three brothers, mother and the first suspect that the three brothers especially the youngest one were left starved for a period of one week. Immediately after taking the youngest brother to dormitory, he was treated for acute bronchiolitis and malnutrition in hospital for seven days, heavy anemia, elevation in hepatic function tests, hepatomegaly were detected.

Cachexia is defined as progressive functional disorders that can not be completely corrected by conventional nutritional support, along with skeletal muscle loss with or without the fatty tissue loss [11]. Cachexia as can be seen in chronic diseases, can also manifest in cases of severe malnutrition. In the etiology of malnutrition resulting from insufficient nutrition or basic nutritional imbalance, child abuse and neglect are important [12]. In children who have been exposed to long-term malnutrition, "xerosis cutis" like skin changes as seen in our cases, hepatosplenomegaly, decrease in subcutaneous fat tissue and muscle sensitivity are defined and it is indicated that these pathologies may be healed with a long-term and planned treatment [12].

In studies, the risk of physical abuse was found to be high in young children living with adults who had no marital affiliation [1]. Our cases were also exposed to abuse and neglect by the defendant who lived in the same household with them and had sexual-emotional association with their mothers.

In the evaluation of the children who are applied with trauma story; Recurring trauma, delayed admission, multiple or recurrent fractures should be considered as physical abuse [13]. Old fracture was found in the mandible at the examination of the youngest case, and in the older case four years ago the patient was referred to the hospital with a "story of falling".

It is clear that emotional, behavioral and cognitive influences will emerge if children who are the most vulnerable victims of domestic violence are exposed to physical violence for a certain period of time.

Behavioral findings may be seen as fear from adults, from family and especially from physical contact, harming oneself or around, aggressive or withdrawn behavior, learning and attention problems, drop in school success, delayed language development, escape from home or delinquent behaviors, clumsy movements or angry, hysterical posture, accidental tendency and fear to go home. Although some or all of these findings may also be seen in not abused children, the presence of these findings draws attention to the possibility that the child has been exploited [14].

Approximately six months before he was taken to institutional care, the older case was found to have received treatment at the Children's Psychiatry Clinic for the cause of activity and attention deficit. No one had a suspicion in his application to the hospital, this family drama could not be revealed until the father's employers informing. Complaints such as mobility, forgetfulness, difficulty in homework, low school achievement, night fears, sleep disturbance were observed in the psychiatric examination performed eight

months after the same case was placed in the dormitory, but he has begun to respond to drug treatment.

The youngest brother who was subjected to the most severe abuse was referred to the hospital for the reason of poor health and poor compliance immediately after being placed in the dormitory and starting in the kindergarten. In the detailed evaluation after about eight months it was determined that compliance problems were still continuing in the institution after school, and drug treatment was started with the cause of anxiety disorder and depressive seizures.

Middle aged brother was treated with severe abdominal pain; mobility, forgetfulness, difficulty in homework, and low school achievement were found in the psychiatric examination performed about eight months after taken to dormitory.

The first suspect's punishment of the children for not being well-behaved, started with punching and slaping, and then the straving act began to accompany. The orientation of those who are obligated to take care of the children, to physical punishment as a mean of discipline, is considered as an important risk factor for physical abuse and when it results in bodily harm it is considered as physical abuse [3,13]. However, according to us, this event is not a risk factor, is direct physical abuse. It also brings emotional and physical consequences. Modern psychology offers many constructive forms of punishment to parents and educators. Moreover, systematic bodily punishment in our case did not come from parents, but was applied to children by foreigners staying at home, and parents were oblivious to this. In family interviews, it was also noteworthy that her mother described the young child as disturbingly loud and curious child. The mother talked that she approved the punishment the suspect applied to her child who was described as chatty and curious. She also tried to clarify herself by saying that she was trying to feed her children when the first suspect who was the lover of her, had not seen them.

It is reported that the risk of physical abuse increases in proportion to the age of the child, serious and fatal injuries are usually seen in children under two years of age and the injuries of medium severity are seen in older children [13]. In our cases, the younger one came out with a heavier clinical picture and the older two brothers came out with relatively lighter clinical tables.

Severe negligence can result in death [2,4]. Child mortality due to neglect is assessed as a natural death or an accident. Because of systematic neglect or starvation, deaths can be considered as natural-cause deaths [15]. Uncovering the ongoing long-running negligence event in the presented events has prevented the achievement of a heavier result such as prolongation of neglect and abuse duration and death.

The presented case also reveals the importance of doctors' awareness of child abuse and neglect, the accumulation of knowledge and motivation in this regard, as well as the importance of the notification obligations of the citizens who

see or know the details of the event. There is a great deal of responsibility for all doctors, especially forensic medicine specialists, non-governmental organizations working in this area, child psychiatrists, psychologists, child development specialists, social workers, lawyers and law enforcement officials. For the awareness of suspicion of abuse in pediatric cases who are admitted to emergency departments or polyclinics of hospitals, it is of utmost importance that all health personnel, especially physicians, have been trained in this subject, and 24 hour uninterrupted service of forensic and social service units in case of child trauma brought to emergency services or other outpatient clinics.

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