



The Society For Pediatric Radiology

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The SPR Research and Education Foundation

To: SPR Members

From: The SPR Officers and the SPR Child Abuse Committee

Several Society for Pediatric Radiology members returned from the International Conference on Abusive Head Trauma/Shaken Baby Syndrome held in late September with the news that the SBU, the Swedish Agency for Health Technology Assessment and Assessment of Social Services (<http://www.sbu.se/en/>) was poised to issue an “evidence-based review” and policy statement that would state that there is little or no evidence base for the diagnosis of Abusive Head Trauma/Shaken Baby Syndrome. Pediatric radiology leaders from the SPR, the European Society of Paediatric Radiology (ESPR), the American Society of Pediatric Neuroradiology (ASPNR) as well as physicians from other organizations (including the American Academy of Pediatrics [AAP]) contacted the Swedish agency and offered to provide peer review prior to publication of the report.

That offer was declined and the report was subsequently published on October 26, 2016

(<http://www.sbu.se/sv/publikationer/SBU-utvarderar/skakvald--triadens-roll-vid-medicinsk-utredning-av-misstankt-skakvald/>).

Unfortunately, an official English translation of the entire document has not yet been released.

Preliminary review has been performed via Google translate and in communication with Swedish colleagues.

The Swedish report expresses that a lack of scientific evidence for shaken baby syndrome and focuses on “the triad” of subdural hematoma, hypoxic-ischemic change and retinal hemorrhages. The document introduces the Swedish term “skakvåld” as a surrogate for “shaken baby syndrome.” Those that have reviewed the report have substantive concerns.

The SPR is both leading and collaborating with other medical societies including the AAP, ESPR and others to ensure that the true state of knowledge on the important subject of abusive head trauma is available to the public. SPR and ESPR Child Abuse Committees will prepare a joint statement in response to the SBU report which will be published in *Pediatric Radiology*. The SPR Child Abuse Committee is already working with other experts on a critical review on abusive head trauma, similar to the critical review recently published on skeletal trauma. SPR leadership and SPR Child Abuse Committee leadership are actively engaged in discussion on further response. We will be constructing a short list of subject matter experts available to respond on behalf of the society to media requests.

Needless to say, the SBU report is highly concerning to all who participate in the healthcare of children. Undoubtedly, this will present challenges to health and wellbeing of children going forward. Obviously, our best approach as individuals is to continue to do our work as best we can, to be informed, and to continue to practice with compassion for the patients and families we serve.