

**Presenter**

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**Topic**

Bruises in infants and toddlers

**Definition of bruises**

- Bleeding beneath intact skin due to trauma
  - Blood from intravascular space leaks into extravascular space
- Petechiae: pinpoint hemorrhages in skin; do not blanche with pressure
- Hematomas:
  - Contusions: larger quantities of blood extravasates into skin without breach of the skin; the result of blunt trauma
  - Ecchymoses: blood dissects through tissue planes to become visible externally

**Myths about bruises**

- Infants bruise more easily than older individuals.
- Different colored bruises are different ages.
- If swelling or abrasions are present at the bruise site, then the bruise is acute.
- Color of bruises can determine the age of a bruise. (Possible exception: yellow has not been reported in bruises less than 18 hours old.)

**Important to know**

- No skin injury by itself is diagnostic of abuse or accident.
- Age of child: bruises rare < 9 months; 17% in toddlers.
- Is the history plausible? Changing? Absent (can happen 28% of the time when injuries less than 1 cm)? Vague? Within child's developmental capability?
- Delay in seeking medical care?
- Other concerning injuries of child or sibs?
- Is there a family or patient history of unanticipated bleeding with seemingly minor trauma?
- Light source is important when assessing injuries.
- Cultural background.

**Predisposition to skin injuries**

- Ehlers-Danlos syndrome
- Coagulopathy
- Corticosteroid atrophy
- Medications (e.g. treatment for malignancy)
- Hyperactivity or developmental delay in older children

## **How to assess bruises**

- Thorough history: When was child last bruise free? When did you see the injury? Where was she? Where were you? Who was she with? What was she doing?
- Intercurrent illness?
- Medications?
- Other conditions (malignancy, autoimmune disease, on meds)?

## **Conclusion**

- Toddlers and infants with facial and other bruises should have complete evaluations for other serious, life-threatening injuries.
- The higher the number of bruises, especially of the chest, back, face and other covered body parts, the more likely that other injuries are present.
- Preambulatory children are unlikely to have bruises, although rare scratches may be present.