

Shaken baby prevention effort reduces cryingrelated calls to nurse advice line

October 26 2015

A new evaluation of a statewide shaken baby prevention effort found that the number of calls to a nurse advice line from North Carolina parents who called because of a crying baby were reduced in the first 2 years after the intervention was implemented in 2007.

However, the study, published Oct. 26, 2015 in *JAMA Pediatrics*, did not find a statistically significant reduction in the number of abusive head trauma (AHT) or "<u>shaken baby</u>" cases in North Carolina during the same period.

"We found this project was a successful implementation of a multi-stage prevention program that reached 88 percent of North Carolina mothers over three and a half years," said Adam J. Zolotor, MD, DrPH, lead author of the study and Associate Professor of Family Medicine in the University of North Carolina School of Medicine.

"In addition, we found that two years after implementation, the number of calls from parents of crying children to the nurse advice line declined by 20 percent for children younger than 3 months and by 12 percent for children ages 3 months to 12 months," Zolotor said.

The study found no association between the intervention and state-level rates of abusive head trauma. "This does not mean that the intervention does not work," Zolotor said. "It simply means that our study did not demonstrate that it did work, and additional studies are needed to answer that question definitively."



"There are many reasons that we may not have shown a decrease in rates of abusive head trauma, including the recession, the fact that this is a rare problem, and other factors that we did not observe," Zolotor said. "However, the application of an economic modeling technique allowed us to attempt to control for some of these weaknesses. Future research may consider more intensive interventions or interventions targeted to high-risk families."

Desmond Runyan, MD, DrPH, director of the Kempe Center for the Prevention and Treatment of child Abuse and Neglect at the University of Colorado, said, "The intervention took place during the most significant economic recession since the great depression. Four previous studies have shown the recession to be associated with increased rates of abusive head trauma. In North Carolina, we may not have shown a decrease, but there was no increase in rates of abusive <u>head trauma</u>." Dr. Runyan was chair of Social Medicine and professor of Pediatrics in the UNC School of Medicine when the study began and is a co-author of the article in *JAMA Pediatrics*.

Parents of babies in the study were provided with an intervention program called the "Period of PURPLE Crying," which was developed by Dr. Ronald Barr, a professor of community child health research and a developmental pediatrician at the University of British Columbia, and Marilyn Barr, founder and executive director of the National Center on Shaken Baby Syndrome. Both Dr. Barr and Marilyn Barr collaborated with the North Carolina project.

The program includes hospital and health care provider-based parent education. The program educates parents and caregivers about the hazards of shaking and gives them alternatives to use when they feel they need a respite from a crying baby, such as handing off the baby to another caregiver.



In addition to Zolotor and Runyan, Heidi Hennink-Kaminski, PhD, of the UNC School of Media and Journalism and Elizabeth Mitchell, PhD of the University of Queensland (formerly at UNC) worked with the National Center on Shaken Baby Syndrome to develop a statewide media campaign to address social norms about shaking and reinforce program messages through caregivers, family, and friends. The Center for Child and Family Health - a collaborative effort involving Duke University Medical Center, North Carolina Central University and the UNC School of Medicine led the implementation of the project. Dr. Robert Murphy, the center's executive director and an Associate Professor of Psychiatry at Duke and Dr. Kelly Sullivan, the center's director of mental health services and Period of PURPLE Crying program manager, led a statewide leadership team that fostered the effort in the 86 hospitals where children are born, as well as in community settings across the state.

More information: *JAMA Pediatr*. Published online October 26, 2015. doi:10.1001/jamapediatrics.2015.2690

JAMA Pediatr. Published online October 26, 2015. doi:10.1001/jamapediatrics.2015.3023

Provided by University of North Carolina Health Care

Citation: Shaken baby prevention effort reduces crying-related calls to nurse advice line (2015, October 26) retrieved 3 May 2024 from <u>https://medicalxpress.com/news/2015-10-shaken-baby-effort-crying-related-nurse.html</u>

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