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SHAKEN BABY SYNDROME: AN ONLINE CONFERENCE

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SHAKEN BABY SYNDROME AND VAERS: A REVIEW AND ANALYSIS

By RFD Columnist, F. Edward Yazbak, MD, FAAP.

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PART ONE HERE

DTAP lot 447831: 4 other reports (106181,111216, 111870, 111437) were filed. Two infants had high-pitch screaming. One had questionable minor seizures. The last infant (see below) had no pre-existing conditions. He vomited, became agitated and had trouble breathing hours after receiving 4 vaccines. He now has cerebral palsy and seizures.

VAERS ID 114337	
Vaccination Date: 1998-03-18	
Age 0.2	
Date filed: 1998-09-24	
Sex M	

ONLINE CONFERENCE CENTER

Also By Dr. Yazbak

About Dr. Yazbak

January 12, 2004

HYPING VACCINES: AN INVESTIGATION

Chickenpox, Lyme, Rotavirus, And A Highly Revealing Analysis Of Flu Statistics

December 22, 2003

DR. ANDREW WAKEFIELD IS BEING BLAMED FOR THE DECLINE IN MEASLES, MUMPS AND RUBELLA VACCINATION IN THE UK. BUT THAT'S NOT WHAT REALLY HAPPENED. THE TREND STARTED YEARS BEFORE HE PUBLISHED HIS INITIAL RESEARCH ON REGRESSIVE AUTISM

December 4, 2003

A NOT-SO-PERFECT VACCINE: THE DIPHTHERIA, TETANUS AND ACELLULAR PERTUSSIS VACCINE: AN INVESTIGATION

November 4, 2003

VACCINATION, RUBELLA AND CONGENITAL RUBELLA SYNDROME

Separating Fact From Fiction

Where Administered:

PVT

State

NJ

Purchased by:

UNK

Vaccinations

Manufacturer

Lot

Dose

Route

Site

1
DTAP
LEDERLE
447831
0

2
HEP
MSD
1186E
1

3
HIBV
LEDERLE(PRAXIS)
0162H

4
IPV
CONNAUGHT LTD
N0292
0

Life Threatening Illness? No

Died? No

Disability? Yes

Recovered? No

ER or Doctor Visit? Yes

Hospitalized?
Yes (days in hospital: 10)

Prolonged Hospitalization?
No

Current Illness:
seizures

Diagnostic Lab Data:

Previous Vaccinations:

Other Medications:

Preexisting Conditions:

November 1, 2003
A DETAILED REPORT ON VACCINES AND AUTISM, INCLUDING THE CURRENT CONTROVERSY BOILING OVER IN THE UK OVER THE MMR VACCINE

October 15, 2003
THE SAGA OF PEDIATRIC HEPATITIS B VACCINATION
When it comes to the Sad Saga of the mandated Pediatric Hepatitis B Vaccination Program, there are still, twelve years later, more questions than answers. Probably the most baffling question is: why was a new vaccine recommended for a vulnerable infant without risk/benefit analysis and in order to prevent a disease that was not an immediate threat and that had a decreasing incidence?

October 10, 2003
SIDS, VACCINES AND VAERS: A FOLLOW-UP
On the basis of his investigation, a physician challenges statements made by the U.S. Institute of Medicine about Sudden Infant Death Syndrome and vaccines

September 22, 2003
SUDDEN INFANT DEATH SYNDROME AND THE VACCINE ADVERSE EVENT REPORTING SYSTEM: A REVIEW

A Physician investigates sudden and unexpected deaths of apparently healthy infants and the possible link of some of these deaths to vaccines

September 8, 2003
SHAKEN BABY SYNDROME AND VAERS: A REVIEW AND ANALYSIS

A physician investigates reports to the Vaccine Adverse Events Reporting System and finds that some parents who were accused of causing "Shaken Baby Syndrome" in their children were probably innocent

Onset Date: 1998-03-19 **Number of Days:** 1

Symptoms: AGITATION ANOMALY CONGEN CNS
 ANOREXIA CONVULS DYSYPNEA GI DIS MENTAL RETARD
 PALLOR REACT AGGRAV SYNCOPE VISION ABNORM
 WEIGHT DEC

started vomiting @ approx 6AM p/bottle; had a sz & then lost consciousness; began crying; seemed to have trouble breathing; head was ice cold & was very pale; bein dx for cerebral palsy

* * *

How many cases of Shaken Baby Syndrome were filed with VAERS in 10 years?

Search: [Shaken Baby Syndrome](#)

Result: 5 reports

The case in the first report (130604) is so tragic that it will be discussed separately.

VAERS ID
 164275

Vaccination Date:
 2000-11-07

Age
 0.4

Date filed: 2001-01-02

Sex
 M

Where Administered:
 PUB

State
 SC

Purchased by:

Life Threatening Illness? No

Died? No

Disability? No

Recovered? No

ER or Doctor Visit? No

Hospitalized?
 Yes (days in hospital: 45)

Prolonged Hospitalization?

Vaccinations
Manufacturer
Lot
Dose
Route
Site

1
 DTAP
 UNCLASSIFIED
 DTAP917A2

IM
 LL

2
 HIBV
 UNCLASSIFIED

IM

3
 IPV
 UNCLASSIFIED

No

Current Illness:
 NONE

Diagnostic Lab Data:

Previous Vaccinations:

Other Medications:

Preexisting Conditions:
 NONE

Onset Date: 2000-11-13 **Number of Days:** 6

Symptoms: CONVULS INJURY ACCID REACT UNEVAL THROM

No data provided. 60 day follow-up states the pt has seizures. Discharge summary states diagnosis is shaken baby syndrome, inferior vena cava thrombus

Not enough information is available to discuss this report adequately.

It is not clear why a diagnosis of SBS was made.

The 4 months old male infant had no pre-existing conditions prior to vaccination. He developed seizures 6 days after receiving 3 vaccines and spent 45 days in the hospital. The interval between vaccination and seizures is appropriate and seizures have been reported after DTP, DTP-containing vaccines and DTAP. There is no relationship between seizures and inferior vena cava thrombosis

Accidental injury is mentioned under symptoms, but no details are given.

Thrombosis of the inferior vena cava is a very serious event, which may be due to direct trauma to the abdomen but no such trauma in mentioned. Interestingly, it is sometimes associated with another SBS: Short Bowel Syndrome.

VAERS ID

166388

Vaccination Date:

2000-10-23

Age

0.2

Date filed: 2001-03-06

Sex

M

Where Administered:

OTH

State

MI

Purchased by:

OTH

Vaccinations

Manufacturer

Lot

Dose

Route

Site

1
DTP
UNCLASSIFIED

IM

2
HEP
MSD

IM

3
IPV

Life Threatening Illness? No

Died? No

Disability? Yes

Recovered? No

ER or Doctor Visit? Yes

Hospitalized?
Yes (days in hospital: 28)

Prolonged Hospitalization?
No

Current Illness:
Respiratory infection on antibiotics

Diagnostic Lab Data:

Previous Vaccinations:

Other Medications:
Antibiotics

Preexisting Conditions: 5 weeks premature; respiratory

<p>SC</p>	<p>infection, on antibiotics</p>
<p>Onset Date: 2000-10-24 Number of Days: 1</p> <p>Symptoms: APNEA BLIND BRAIN SYND ACUTE CONVULS DEAF ECCHYMOSIS EDEMA TONGUE INJURY INTENT PETECHIA SCREAMING SYND</p> <p>The pt's grandmother reported that a 2 month old male pt received vaccines on 10/23/00. Reportedly, the next day, the pt developed continuous crying, seen in physician's office. The pt was hospitalized on 11/22/00 due to respiratory failure, bruising around the mouth, petechia and swollen tongue. Pt was discharged on 12/20/00 with a dx of Shaken Baby Syndrome with brain damage, blind and deaf. Pt is on feeding tube and Phenobarbital for seizures. No further info is available. Upon internal review, seizures</p>	
<p>This infant, who was 5 weeks premature, was sick and on antibiotics when he was vaccinated at the age of 2 months. The screaming syndrome and convulsions are known reactions to DTP. He had an anoxic hypoxic episode and respiratory failure with resulting brain damage, inability to swallow, blindness and deafness. The petechiae, bruising around the mouth and swollen tongue were caused, in all likelihood, by rough resuscitative efforts. Lot numbers were not listed and cannot be checked.</p> <p>The information provided does not seem to support a diagnosis of Shaken Baby Syndrome.</p>	
<p>VAERS ID 168563</p> <p>Vaccination Date: 1995-07-12</p> <p>Age 0.3</p> <p>Date filed: 2001-04-12</p> <p>Sex M</p> <p>Where Administered: PVT</p> <p>State OH</p> <p>Purchased by:</p>	<p>Life Threatening Illness? Yes</p> <p>Died? No</p> <p>Disability? Yes</p> <p>Recovered? No</p>

Vaccinations
Manufacturer
Lot
Dose
Route
Site

1
 DTAP
 LEDERLE
 390969
 2
 IM

2
 HIBV
 LEDERLE
 010LD
 2
 IM

3
 UNK
 UNCLASSIFIED
 722H1
 2

ER or Doctor Visit? Yes

Hospitalized?
 Yes (days in hospital: 14)

Prolonged Hospitalization?
 No

Current Illness:
 NONE

Diagnostic Lab Data: MR-
 showed cerebral palsy and cortical visual impairment.

Previous Vaccinations:

Other Medications:
 NONE

Preexisting Conditions: 3 months premature at birth; healthy

Onset Date: 1995-07-20 **Number of Days:** 8

Symptoms: AGITATION ANOMALY CONGEN CNS COMA CONVULS GRAND MAL HEM INTRACRAN HEM RETINAL INFECT INJURY ACCID RESPIRAT DIS STUPOR VISION ABNORM

Became fussy and took to doctor. He said it was a virus. Child became worse; went back to the doctor and he had a grand mal seizure and stopped breathing in the waiting room. He was taken to the hospital and almost died from seizures. MR showed cerebral palsy and cortical visual impairment. The 60 day follow-up states cerebral palsy. Diagnosis from hospital: shaken baby syndrome with intracranial hemorrhage, retinal hemorrhage, Traumatic Stupor - Coma

This baby was born 3 months before term. He was "healthy" when at age 3 months he received 3 vaccines. He developed symptoms 8 days after vaccination and was evaluated. He did not have any evidence of injury and was sent home with a diagnosis of a viral illness.

He was brought back to the doctor's office where he convulsed and stopped breathing. He became permanently damaged. The circumstances as described do not suggest abuse. The timing of the severe seizures is compatible with a vaccine reaction.

There were 8 other reports to VAERS for DTaP lot 390969: 66129, 75239, 76157, 76167, 76476, 76860, 86318, 94563. Case 76476 had a seizure.

There were 42 reports to VAERS with HIB lot 010LD (actually M010LD). Seven infants were hospitalized and one expired (case 77666),

VAERS ID

178960

Vaccination Date:

2001-11-28

Age

3.0

Date filed: 2001-12-13

Sex

M

Where Administered:

PUB

State

MO

Purchased by:

PUB

Life Threatening Illness? No

Died? Yes (date died: 2001-11-28)

Disability? No

Recovered? No

ER or Doctor Visit? No

Hospitalized? No

Current Illness: NONE

Diagnostic Lab Data: NONE

Previous Vaccinations:

Other Medications:
 Phenobarbital;
 Baclofen;
 Robinul;
 Extendryl; Zyrtec Syrup; Nasonex Spray; Senocot Children's Syrup; NaFl; Acetaminophen Solution; Atrovent Neb

Preexisting

Vaccinations

Manufacturer

Lot

Dose

Route

Site

1
 FLU
 WYETH
 4018041
 4
 IM

<p>RA</p>	<p>Conditions: Shaken baby syndrome at 5 weeks of age; Blind; CA; Seizures; 13 weeks premature; Disorder microcephaly; NPO with G-tubes</p>
<p>Onset Date: 2001-11-28 Number of Days: 0</p> <p>Symptoms: INJURY INTENT</p> <p>The pt had no problems immediately after injection or prior to being discovered dead in crib at 05:45 on 11/28/01. On the last check of pt at 03:00 on 11/28/01, he was laughing and playing. Death certificate indicates the child died from shaken baby syndrome (suffering from this since 5 weeks old according to the dept of health).</p>	

This 3 year-old boy (ex-13 weeks premature) died hours after receiving a flu vaccine. It is difficult to understand how a 1998 diagnosis of shaken baby syndrome can be listed as the cause of a sudden death in 2001, particularly when the child had "no problems" in the doctor's office immediately after he received the flu vaccine and even later at home, before he died.

In 2001, the same flu vaccine was used for children and adults. The dose was _ cc for children under the age of 3 and _ cc for adults and children over 3. It is more than likely that an infant with all the problems listed, who is only fed by gastrostomy tube, was small in stature and weighed much less than an average 3-year old. Under the circumstances, many pediatricians would have scaled the dose down to a _ cc. It is not known whether this was done.

The limited information available suggests that several causes other than intentional injury could have caused the baby's problems at age 5 weeks.

Listing the cause of death as shaken baby syndrome is not justified.

Three other reports were filed with Flu vaccine lot number 4018041.

All 3 patients were adults. Two, 181314 and 181315, concerned females vaccinated in the same day and in the same facility in NY. The last was from Maryland. In all probability, all 3 received the same dose as the baby.

<p>VAERS ID 130604</p> <p>Vaccination Date: 1998-11-03</p> <p>Age 0.1</p> <p>Date filed: 1999-11-12</p>	
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Sex
M

Where Administered:
PVT

State
NY

Purchased by:
OTH

Vaccinations
Manufacturer
Lot
Dose
Route
Site

1
DTAP
CONNAUGHT LABS
0962260
0
IM
RL

2
HBHEPB
MSD

0

3
HIBV
MSD
0907H
1
IM
LL

4
IPV
CONNAUGHT LTD
N0597
0
SC
RL

Life Threatening Illness? No

Died? No

Disability? No

Recovered? Yes

ER or Doctor Visit?
No

Hospitalized? Yes
(days in hospital: 8)

Prolonged Hospitalization? No

Current Illness:
NONE

Diagnostic Lab Data:

Previous Vaccinations:

Other Medications:
pt recv pedvax HIB by MERCK given 9/13/98;

Preexisting Conditions: club foot-left;

Onset Date: 1998-11-12 **Number of Days:** 9

Symptoms: AGITATION CONVULS CRY ABNORMAL
HEM RETINAL HEMATOMA SUBDURAL

p/vax pt devel constant crying; pt exp a sz; pt hosp x 8 days; dxed w/ retinal hemorrhages & subdural hematomas. Follow up received 5/3/01 states the baby's problem was "shaken baby syndrome" with intercranial hemorrhages, not a reaction to shots. No further information available regarding the pt or this case. 15-day follow up received 5/15/01 states the baby's problem was "shaken baby syndrome" with intracranial hemorrhages not a reaction to the shots. The pt's father has been convicted and is in jail for sha

It is difficult to adequately evaluate this case with the available information.

It is possible that whoever reported to VAERS on 11/12/1999 listed wrong vaccine names and lot numbers. The tone and "language" used suggest it was a professional rather than a parent.

The baby's clubfoot could have been due to oligohydramnios, or reduced amniotic fluid, a condition that may have caused other problems in the fetus.

Constant crying and seizures 8 or 9 days after vaccination are accepted vaccine reactions. As mentioned earlier, retinal hemorrhage has been described after Hepatitis B vaccination.

In the report, 0907H is listed as a HIBV lot number. It is not. It is a HBHEPB lot number.

HBHEPB is a combination vaccine containing HIB and Hepatitis B vaccine. If indeed the baby received a dose of HBHEPB vaccine and a dose of a vaccine from lot 0907H, as reported, he actually would have received TWO doses of the same HBHEPB vaccine or two HIB and two Hepatitis B vaccines and 75ug of mercury on the same day. According to the EPA (Environmental Protection Agency), mercury intake should not exceed 0.1ug/Kg body weight /day. A baby this age usually weighs about 4 kg.

In addition, the baby was under 2 months of age on 11/3/98 (listed as age 1 month). He should not have received a PedvaxHIB (a HIB vaccine) on 9/13/1998, shortly after birth. The first dose of HIB vaccine is usually administered around 2 months of age. It is the first dose of hepatitis B vaccine, which is recommended shortly after birth.

The original report was filed on 11/12/1999, one year after the event.

Two statements to the effect that this was Shaken Baby Syndrome and not a vaccine reaction were added some 18 months later (5/3/2001 and 5/15/2001).

It would be interesting to know if this dad is still in jail. Whether he is or not, the complete medical record should be carefully reviewed.

Note: If an appeal is considered, the following information about DTAP lot 0962260 and HBHEPB lot 0907H would be of help.

There are 89 reports to VAERS with DTAP lot 0962260.
 Four infants had convulsions: Reports 120168, 120302, 151191 and 170393:
 There were two reports of death: 132111 and 170393, both somewhat relevant to the discussion.

<p>VAERS ID 132111</p> <p>Vaccination Date: 1999-11-26</p> <p>Age 0.4</p> <p>Date filed: 1999-12-10</p> <p>Sex M</p> <p>Where Administered: PUB</p> <p>State TX</p> <p>Purchased by: PVT</p>	<p>Life Threatening Illness? Yes</p> <p>Died? Yes (date died: 1999-11-28)</p> <p>Disability? No</p> <p>Recovered? No</p> <p>ER or Doctor Visit? No</p> <p>Hospitalized? No</p> <p>Current Illness: resp distress, pneumothorax, PDA, Apnea, anemia, thrombocytopenia, hypotension;</p> <p>Diagnostic Lab Data:</p> <p>Previous Vaccinations:</p> <p>Other Medications:</p> <p>Preexisting Conditions: resp distress, pneumothorax, PDA, Apnea,</p>
<p><u>Vaccinations</u> <u>Manufacturer</u> <u>Lot</u> <u>Dose</u> <u>Route</u> <u>Site</u></p> <p>1 DTP CONNAUGHT LABS 0962260 0 IM</p> <p>2 HEP MSD 1522J 0 IM</p> <p>3 HIBV</p>	

LEDERLE(PRAXIS)
 458728
 0
 IM

 4
 IPV
 CONNAUGHT LTD
 P02422
 0
 SC

Anemia,
 thrombocytopenia,
 hypotens, candida
 UTi, penumonia;

Onset Date: 1999-11-27 **Number of Days:** 1

Symptoms: FEVER

p/vax pt devel fever, initially low grade, then 104 by
 11/29/99 AM; APAP q 4hr beginning w/vax;

This infant had documented thrombocytopenia or low platelet count. Symptoms seen with reduced platelets include bruising, bleeding without obvious injury and non-clotting

VAERS ID
 170393

Vaccination Date:
 1999-01-08

Age
 0.7

Date filed: 2001-05-31

Sex
 M

Where Administered:
 PVT

State
 FL

Purchased by:
 PUB

Life Threatening Illness? Yes

Died? Yes (date died: 1999-01-09)

Disability? No

Recovered? No

ER or Doctor Visit? Yes

Hospitalized?
 Yes (days in hospital: 2)

Vaccinations
Manufacturer
Lot
Dose
Route
Site

1
 DTAP
 CONNAUGHT LABS
 U0962260
 0
 IM
 LL

2
 HEP
 SMITHKLINE
 ENG626A
 0
 IM
 RL

3
 HIBV
 LEDERLE(PRAXIS)
 M240RL
 0
 IM
 LL

4
 OPV
 LEDERLE
 45084607
 0
 PO

Prolonged Hospitalization?
 No

Current Illness:
 Gastroenteritis and vomiting for 1 day

Diagnostic Lab Data:

Previous Vaccinations: ; UNK. DTAP;; 2.00; In Sibling

Other Medications:
 Tylenol

Preexisting Conditions: NONE

Onset Date: 1999-01-08 **Number of Days:** 0

Symptoms: ANAPHYL APNEA BONE FRACT SPONTAN CONVULS ECCHYMOSIS EDEMA BRAIN ENCEPHALITIS EYE DIS HEM INTRACRAN HEM RETINAL HEM SUBARACHNOID HEMATOMA SUBDURAL INJURY ACCID PNEUMONIA SCREAMING SYND SKIN DIS SOMNOLENCE

Convulsion, caused eye contusion, E.T.C.; lethargic en-route to hospital, E.T.C.; Encephalitis, high pitched screaming, E.T.C., pneumonitis, apnea, anaphylaxis, sclerosis.

This report is very important.

Shortly after receiving the 4 listed vaccinations, this seven months old

infant had all of the following: convulsions, apnea (stopped breathing), injury/fracture, brain edema, retinal, subarachnoid and subdural hemorrhages, encephalitis and pneumonia and died. The uninformed could have interpreted all these symptoms as evidence of SBS. The pediatrician was right to report the case as a vaccine reaction.

There were 8 reports to VAERS concerning HBHEPB 0907H, including one death (case 130608), which interestingly was reported on the same day as case 130604.

<p>VAERS ID 130608</p> <p>Vaccination Date: 1999-10-01</p> <p>Age 1.0</p> <p>Date filed: 1999-11-12</p> <p>Sex F</p> <p>Where Administered: PUB</p> <p>State KY</p> <p>Purchased by: PUB</p>	<p>Life Threatening Illness? No</p> <p>Died? Yes (date died: 1999-10-13)</p> <p>Disability? No</p> <p>Recovered? No</p> <p>ER or Doctor Visit? No</p> <p>Hospitalized? No</p> <p>Current Illness: NONE</p> <p>Diagnostic Lab Data: chemistry-BUN 36, CR 0.8, aGT 162, LDH 4054; aridocid 9.1; paltelets 90,000; PT/PTT 18.1/39.4; abrinogan 382; bil 1.8;</p> <p>Previous Vaccinations: NONE</p> <p>Other Medications: NONE</p> <p>Preexisting Conditions: NONE</p>
<p><u>Vaccinations</u> <u>Manufacturer</u> <u>Lot</u> <u>Dose</u> <u>Route</u> <u>Site</u></p> <p>1 HBHEPB MSD 0907H 3 IM LL</p> <p>2 OPV LEDERLE 0998H 2 PO</p>	

Onset Date: 1999-10-13 **Number of Days:**
12

Symptoms: ABDO ENLARGE APNEA BUN INC
CYANOSIS FEVER HEART ARREST INFECT LAB
TEST ABNORM PAIN PROTHROMBIN DEC
THROMBOCYTOPENIA THROMBOPLASTIN DEC

pt adm to hosp 10/13/99 w/fever, leg pain, abd
distention & leg purple; dx Beta-hem,
streptococci group A invasion.-transported to
hosp; complications; cardiopulmonary arrest;

12 days after vaccination, this one-year old girl from Kentucky developed thrombocytopenia and coagulopathies, with pain and purple discoloration of the legs, abdominal distention, renal involvement, breathing difficulty, cyanosis and cardio-respiratory arrest. She died within 24 hours. The beta-hemolytic streptococcus group A sepsis was probably the result of "immune paralysis" a rare vaccine reaction Similar cases of sepsis after HIB vaccination were described earlier in this review with HIB M030FC (27224, 27494, 27648, 28438).

* * *

Lastly, how many reports with SBS were there?

Search: SBS

Result: 2 cases

In the first case (103221), SBS was a typographical error, because it referred to FBS (Fasting Blood Sugar). The second is case 188855 (below), which is important because of the report of multiple rib fractures.

VAERS ID
188855

Vaccination Date:
2002-05-01

Age
0.4

Date filed: 2002-08-14

Sex
M

Where Administered:
PVT

State
CA

Purchased by:

**Life Threatening
Illness?** No

Died? No

<p>OTH</p> <hr/> <p><u>Vaccinations</u> <u>Manufacturer</u> <u>Lot</u> <u>Dose</u> <u>Route</u> <u>Site</u></p> <p>1 DTAP AVENTIS PASTEUR, DO546AA</p> <p>2 HIBV AVENTIS PASTEUR, UA482AA</p> <p>3 IPV AVENTIS PASTEUR, U0824</p> <p>4 PNC LEDERLE LABORATO 425997</p>	<p>Disability? No</p> <p>Recovered? No</p> <p>ER or Doctor Visit? Yes</p> <p>Hospitalized? Yes (days in hospital: 4)</p> <p>Prolonged Hospitalization? No</p> <p>Current Illness: Stuffy, congested, heavy breathing</p> <p>Diagnostic Lab Data:</p> <p>Previous Vaccinations: Excessive crying; Hep B (unknown mfr); 1; 0; In Patient</p> <p>Other Medications: NONE</p> <p>Preexisting Conditions: NONE</p>
<p>Onset Date: 2002-05-06 Number of Days: 5</p> <p>Symptoms: AGITATION ANOREXIA FEVER HEM MONILIA ORAL RHINITIS SCREAMING SYND SOMNOLENC E VASODILAT</p> <p>1st shot 3/8/02, HEB 1, congested, irritable, fussy. 2nd shot 5/1/02, IPV/OPV, DTaP, DTP, DT/TD, HIB, PPV, very congested, irritable, high pitch cry, fever, hot and cold flashes, cold sores-thrash, sleepy, no eating well. No solutions. Doctors say baby has "SBS." Subdural heamtoma, non-accidental trauma, multiple rib fractures.</p>	

This baby reacted to his first hepatitis B vaccine with excessive crying. He had a cold when he received 4 vaccines together on 5/1/2002. Irritability, high-pitch cry and fever suggest a vaccine reaction. Hot and cold flashes, cold sores and congestion are symptoms related to the pre-

existing viral illness. It is not known whether the so-called subdural hematoma was old or new or old and new, a re-bleed. A detailed description of the MULTIPLE rib fractures would have been helpful; unfortunately it is not available. Evidence of other trauma and severe injury to the chest wall and lungs should have been noted if multiple ribs were broken all together. If the fractures were at different stages of healing, intentional trauma would be less likely. The suggestion that a parent can break his infant's ribs, only one rib at a time every few days, without inflicting any other injury, or being noticed, is far fetched. In an infant, "fractured" ribs "healing at different stages of callus formation" may represent sequential spontaneous bleeds under the periosteum due to a metabolic disorder or sub-clinical scurvy.

The fate of the caretaker is not known. It is possible that he or she is still in jail in California.

Vaccines review:

DTAP lot DO546AA: This case was the only one reported.

HIB lot UA482AA: There were 4 reports. The other 3 were reactions at the injection site.

IPV UO824: 6 reports filed. None was relevant to this discussion.

PNC (Pneumococcal vaccine) lot 425997: This case was the only one reported.

* * *

Discussion

A simple search of VAERS data yielded several reports of "Shaken Baby Syndrome".

After careful review, it is clear that in most cases the diagnosis of SBS was questionable and the possibility of a vaccine reaction more likely.

Local and state police may have hesitated in filing charges if they had seen the preceding information.

It is unlikely that a judge or jury would have rendered a guilty verdict in any of the discussed cases. An appeal should be considered if a parent is still incarcerated as a result of these reviewed reports.

Even at this late stage, evaluation of the records and evidence in the cases by the respective "State Board of Medical Review" may help vindicate the parents.

Child protective agencies will get involved and actually remove the infant and his or her siblings to foster care for extended periods of time if they suspect abuse, whether criminal charges are filed or not. Trying to extricate the family from this situation can be very difficult. Parents should remain calm, cooperative and courteous at all times. Locking horns with the young social worker on the case or her powerful supervisor is useless and often counter-productive. Hopefully in time, the family's innocence will be recognized and things will be allowed to return to normal.

The employees of the department of children and families have stressful jobs and very heavy caseloads. They are forever reminded about the few unfortunate situations when infants were returned to abusive parents only to be injured a short time later. Their position "to be rather safe than sorry" is understandable, though at times unjustified.

Parents need to become very knowledgeable about vaccines, so that their

consent is truly "informed" every time; they should gather all available information and not be afraid to ask questions. An infant with any problem, past or present, could be at-risk for an adverse event.

Because several vaccines are often administered together, their reactions may be difficult to assess. Sorting events and responsibility will become more of a challenge. If the vaccines are new on the market, some of their after-effects may not have been fully understood or reported as yet.

If a baby develops any symptoms following vaccination, the parent/caretaker should inform the physician at once and go on "high alert".

It is advisable to keep the private physician or pediatrician involved in the case, even if the infant is hospitalized. His or her knowledge of the situation can be helpful particularly in discussions of family dynamics.

Should the empathic attitude of the hospital staff change or should someone bring up the subject of shaken baby syndrome or child abuse, the "suspected parent/caretaker" should remain non confrontational. He/she should ask a lot of questions and write long notes about what is being said and done, describing signs, symptoms and tests in great detail. This will be very difficult under the circumstances, but could be of great help later on.

An attorney should be contacted early rather than late and if possible, a consultation by a medical specialist should be requested as a second opinion. If the baby's pediatrician is not on the case, he or she should be also notified and asked to help.

The parents should promptly file a report with VAERS if the symptoms and timing suggest a vaccine reaction. The toll free number is (800) 822 7967

All efforts must be directed towards saving the affected baby. Nothing else is as important.

If the infant expires, a medical examiner's report should be considered incomplete if it does not include a discussion of all recent vaccinations.

Conclusions

A parent or a caretaker who is out of control may shake or hit an infant against a hard surface. It is imperative that all children are protected and that the abusive adult is punished.

On the other hand, as this review suggests, some accused parents whose children were thought to have "Shaken Baby Syndrome" were probably innocent.

A diagnosis of Shaken Baby Syndrome must not be made lightly. It should only be entertained when all other causes for the findings, vaccines included, have been thoroughly examined and ruled out.

Any future research on child abuse and specifically Shaken Baby Syndrome must include a discussion of recent vaccinations.

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