

Analysis of causes that led to subdural bleeding and rib fractures in the case of Baby Patrick Gorman

Mohammed Ali Al-Bayati, PhD, DABT, DABVT

Toxicologist & Pathologist

Toxi-Health International

150 Bloom Drive, Dixon, CA 95620

Phone: (707) 678-4484 Fax: (707) 678-8505

Email: maalbayati@toxi-health.com

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Abstract

Patrick and his twin sister, Peyton, were born 5 weeks premature. He suffered from acute abdominal and nonspecific symptoms at the age of 2½ months. CT scans, X-ray, and eye exams revealed that he had subdural and subretinal bleeding and seven rib fractures in various stages of healing. He also had severe anemia, thrombocytosis, low blood creatinine levels, hyperglycemia, and elevated neutrophils and monocyte counts. The treating physicians alleged that Patrick's health problems resulted from shaking [shaken baby syndrome (SBS)] and child abuse. Patrick's parents were accused of causing Patrick's injuries.

My investigation revealed that Patrick's acute symptoms resulted from acetaminophen intoxication. Patrick was treated with Tylenol/cold and he received about 200 mg of acetaminophen per day (64 mg/kg) and 3200 mg per 16 days. He was also treated with Zantac® (ranitidine) and Zantac potentiates the hepatotoxicity of acetaminophen. The subdural and subretinal bleeding was caused by vitamin K deficiency, intoxication with acetaminophen, and severe anemia. The healed rib fractures occurred due to vitamin K and protein deficiencies and chronic coughing. It seems that the treating physicians alleged that Patrick's health problems resulted from abuse, without considering the clinical data that lead to different causes, or performing differential diagnosis in this case.

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Keywords: acetaminophen intoxication; anemia; coughing; differential diagnosis; edema; false accusation; fertility drugs; gastroesophageal reflux; hypothyroidism; pregnancy complications; premature infant; protein deficiency; Ranitidine; retinal and subretinal bleeding; rib fractures; subdural bleeding; thrombocytosis; vitamin K deficiency; Zantac