



## When to call 118

Your child needs urgent medical consultation if one or more of the following "alarm symptoms" appear:

- loss of consciousness;
- convulsions ("fits");
- repeated, projectile vomiting;
- problems maintaining balance (*dizziness*), difficulty in walking;
- problems with vision, crossed eyes, pupils of different sizes;
- neck pain;
- drowsiness (*your child tends to fall asleep at unusual times*), insomnia or difficulty waking your child up;
- unusual personality and behavioural changes, irritability (*insistent and persistent crying that cannot be soothed*), nervousness, mental confusion;
- difficulty speaking, hearing and understanding;
- confusion in remembering names, places, dates;
- headache with general malaise;
- memory loss;
- loss of blood from an ear or from the nose;
- clear fluid running from the nose;
- front fontanelle bulging and tense in an infant.

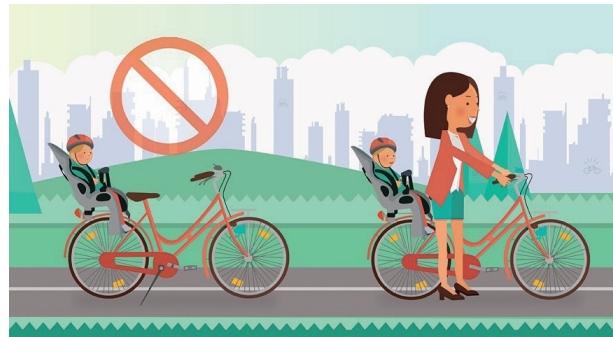
## How to prevent head injury

Prevention, suitable for the child's age, is the best measure for reducing the risk of head injury.

We recommend taking extreme care when using changing tables, child seats and carry-cots (bouncy seats, baby buggies, etc.) placed on tables or shelves, and high chairs without restraints.

**Never leave a young child alone on a changing table or a bed or sofa.**

We recommend placing suitable guards on stairs, steps, beds, etc.; the use of a baby walker is not recommended at all.



Children **must always wear a helmet while riding a bike**, even as a passenger, and **must always be secured in a child restraint appropriate for their age or with safety belts while riding in a car**, as required by law.

OLDER children must wear helmets for all dangerous sports (*skateboarding, baseball, horse riding, skiing...*) and on any transport with wheels (*hoverboard, scooter...*).

## Head injury

*Informative pamphlet written and shared by primary care paediatricians and hospital-based paediatricians of the healthcare authority Azienda USL - IRCCS of Reggio Emilia*



## Introduction

The most common cause of head injury (*a blow to the head*) is - in 75% of cases - an accidental fall (*generally from a bed, sofa or changing table; during play, etc.*). The next most common cause is road injuries (a vehicle hitting the child; an accident as a passenger in a car, on a bicycle, etc.), with sports accidents in third place.

The most dangerous outcome of head injury is the formation of an "**intracranial haematoma**" - a collection of blood within the skull. When this haematoma increases in volume, it may compress ("*crush*") the brain.

The haematoma may form for a number of hours, so that symptoms may occur even several hours after the injury.

## How is a head injury treated?

- Repeatedly apply ice, if available, or cold water to the injured area of the head for 10-15 minutes, which will reduce pain and limit swelling (the "bump on the head").
- If your child's head injury was not caused by a fall from a great height (less than a metre), if the child has not lost consciousness, cries right away and is soothed fairly quickly, you have nothing to worry about in the short term, but you must keep him/her under observation for 48 hours.
- **An urgent medical assessment is necessary when the dynamics of the injury cannot be clearly defined, e.g. if the child was alone and no one witnessed the event or in the event of a road accident due to the risk of damage to the bones or internal organs.**
- It's important to keep your child under close observation **for 48 hours after the injury.**

## What to look for during the 48 hours after a head injury

### - **WHEN THE CHILD IS AWAKE:**

Keep an eye on his/her behaviour, make sure that he/she can walk and move normally, that he/she uses his/her arms and hands to grasp objects, that he/she behaves in ways that are consistent with his/her usual habits and abilities, and that he/she recognises the people he/she is close to and the objects he/she is familiar with and that he/she does not develop any "alarm symptoms".

### - **WHEN THE CHILD IS ASLEEP:**

about every two hours, make sure he/she is breathing normally and is in a relaxed position. Call to him/her and/or touch him/her gently, and make sure he/she reacts.

