Pediatric Head Injury
Written By: Paul M. Deutsch, Ph.D., CRC, CCM, CLCP, FIALCP

As the rehabilitation professional gains more experience in working with children with brain injury a growing number of distinctions will be found that separates this population from those with seemingly similar but nevertheless different impairments.

Two areas of particular concern stand out in the consideration of pediatric head injury. The first is the substantial differences that exist between the child with traumatic brain injury (acquired brain injury post-birth) and the child born with mental retardation. We frequently see efforts made to extrapolate data collected on the mentally retarded to the acquired brain injury population within the pediatric sector. This is inappropriate, represents assumptions that cannot be substantiated and introduces a wide range of confounding variables that significantly reduce the validity and reliability of this research.

The second area of distinction is the difference between the child with an acquired head injury and the late adolescent or adult. Seemingly similar areas of focal or diffuse damage will often produce substantially different sequelae in children. Children also have a substantially greater degree of plasticity and a longer period over which one can anticipate growth and changes (generally through the developmental years).

The following is a list of suggested articles for reading:


