## Childhood Crash Injury Patterns Associated with Restraint Misuse



Presenters: Eileen Bulger, MD Rob Kaufman, BS

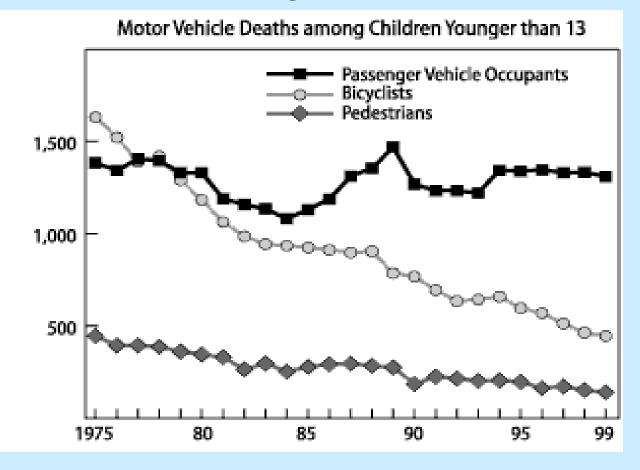




CIREN- Crash Injury Research and Engineering Network



#### Death rates among children in motor vehicle crashes through the last decade



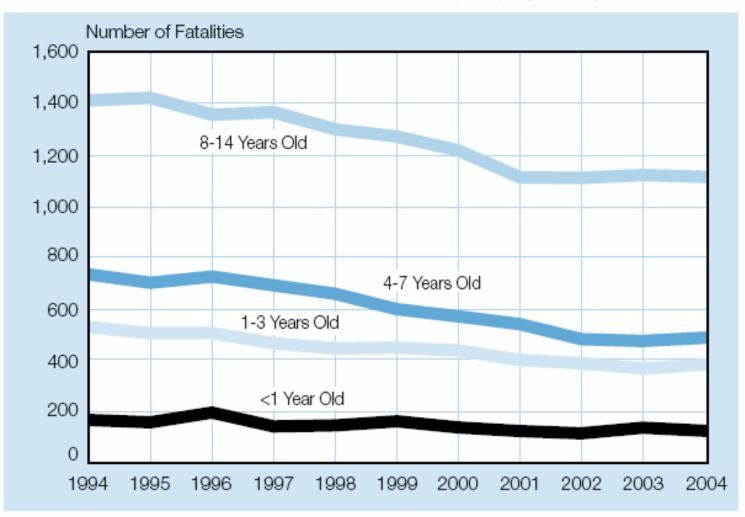
NHTSA - Traffic Safety Facts

## Pediatric Motor Vehicle Deaths

- Motor vehicle crashes are one of the leading causes of death for 3-13 year olds.
- Premature graduation to seatbelts, none used, or child restraint misuse.
- No decrease in 4-8 yr child occupant death rates between 1994-99.
- Starting in Year 2000 fatality data reported for ages 0-15 dropped to lowest level. (0-4 down 3.9% and 5-15 down 4.6%)

#### 2004 NHTSA Traffic Safety Facts – Total Traffic Fatalities

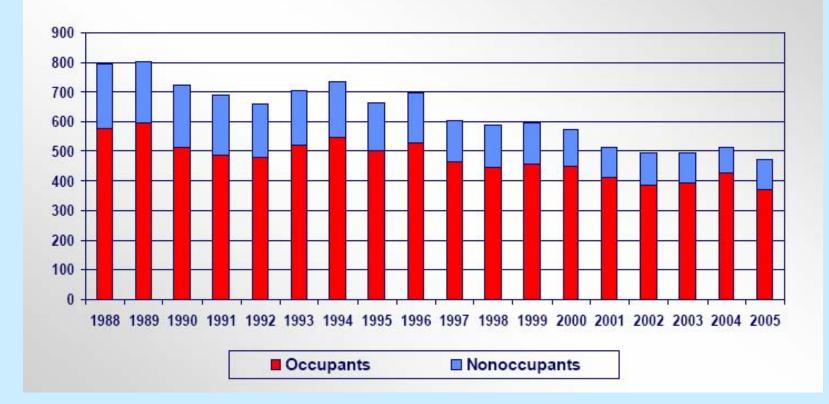
Total Traffic Fatalities Among Children 14 and Younger by Age Group, 1994-2004



NHTSA's National Center for Statistics and Analysis



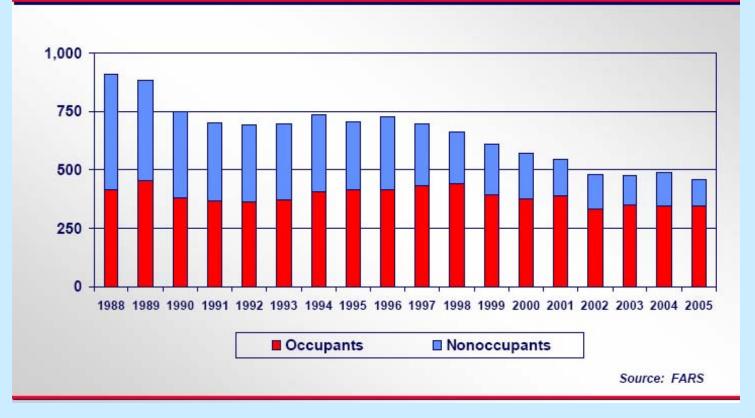
#### Children, Age 0-3, Killed, by Year and Role



#### NHTSA's National Center for Statistics and Analysis



#### Children, Age 4-7, Killed, by Year and Role



Non-occupant declined, but occupant shows no change last 3-4 yrs

#### 2004 Traffic Safety Facts, NHTSA

Children Under 5 Years Old Fatally Injured in Passenger Vehicle Crashes by Age Group and Type of Restraint, 2004

Type of Restraint	Infants (Under Age 1)	Toddlers (Age 1-4)	Total	
None Used	36	142	178	
Child Safety Seat	80	191	271	
Adult Safety Belt	4	42	46	
Total	120	375	495	

Restraint Use by Passenger Vehicle Occupants Involved in Fatal Crashes by Age Group, 2004

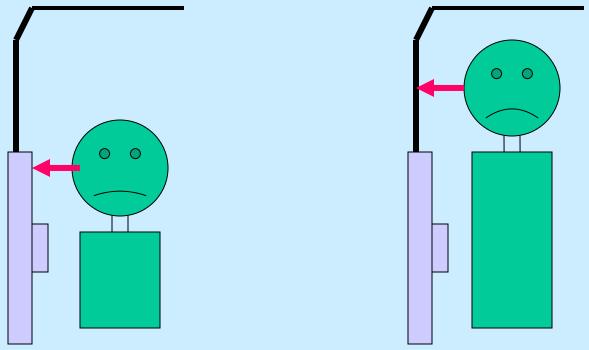
	Age Group (Years)						
Percentage Unrestrained	<1	1-3	4-7	8-14	All Other	Total	
	16	18	28	36	38	37	

#### Children in Side Impacts

#### Roll of Booster Seat Positioning

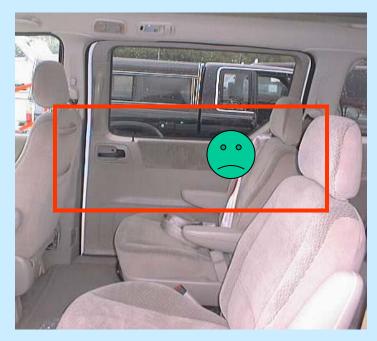
## Head Injuries

Remember that children are exposed to more surface area for head contact in crashes.



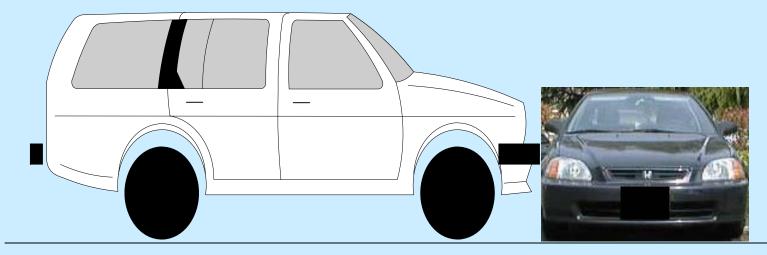
Children that are seated in vehicles expose themselves to more surface area for head contacts

Adults head contacts will occur to the greenhouse structure (roof and roof pillars)





## Larger Vehicle and Side Impacts



Large vehicle types vs. compact/economical

Impact to upper door

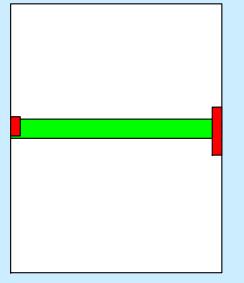
### Upper door panel intrusion

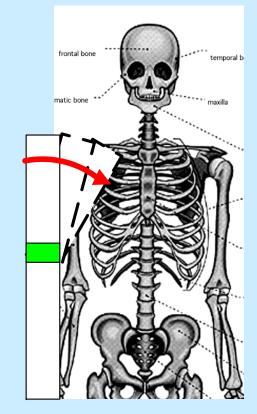


Compact Wagon vs. SUV

Upper door panel intrusion may occur into near-side impact position

# Side impacts with larger vehicles with lateral door support beams





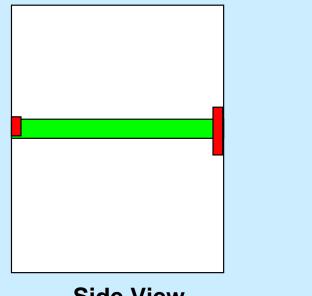
#### Adult pattern

Impact to thoracic region

**Side View** 

**End View** 

# This becomes head contacts for children



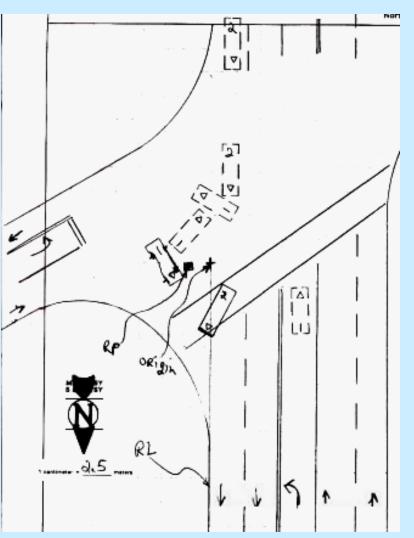
Side View

**End View** 

#### **CIREN** Case Review



1990's Compact SedanModerate forceStruck by large pickup



#### Case review



8 yr.

Back right seat - fully restrained

Sleeping with head against the door panel

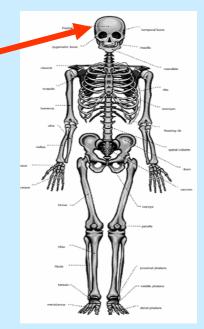
No Booster Seat used

### Interior Contacts and Door Panel Intrusion





#### Critical Head Injury



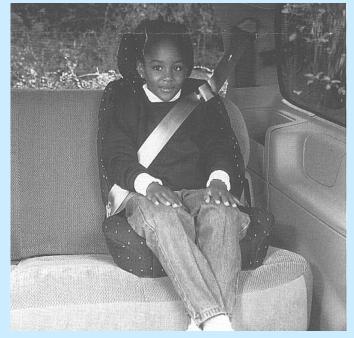
## 40 cm of intrusion at door panel, window sill

## Side impact w/ child in booster seat



7yr old, second row right

Lap/shoulder with booster seat



Minor Head Injury



Head positioned above door interior

### Inflatable Curtain

• Booster seat will allow children to possibly benefit from a side impact air bag



## FRONTAL IMPACTS

Child Seat Misuse Rear-facing Infants



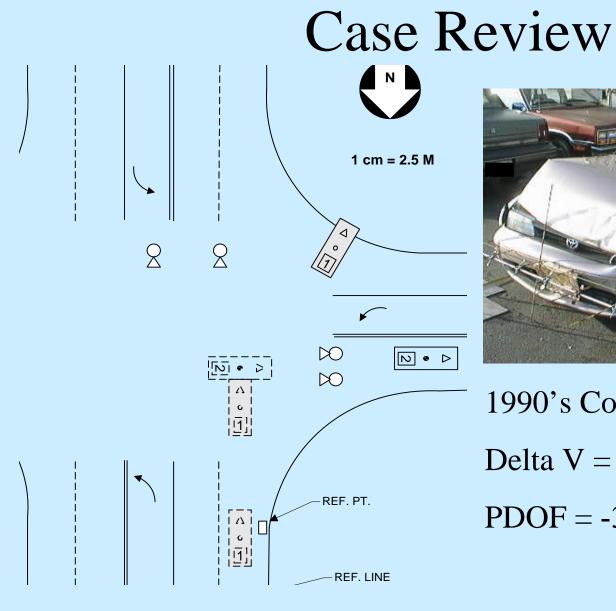
## Child Seat Tech 101

- 1. Harness SNUG
- 2. Retainer clip at armpit level





3. Child seat secured firmly w/ seat belt





1990's Compact Sedan Delta V = 12 mph/19kmph PDOF = -30 or 11 o'clock

### Case Review



Infant

Harness not used, and child seat not belted

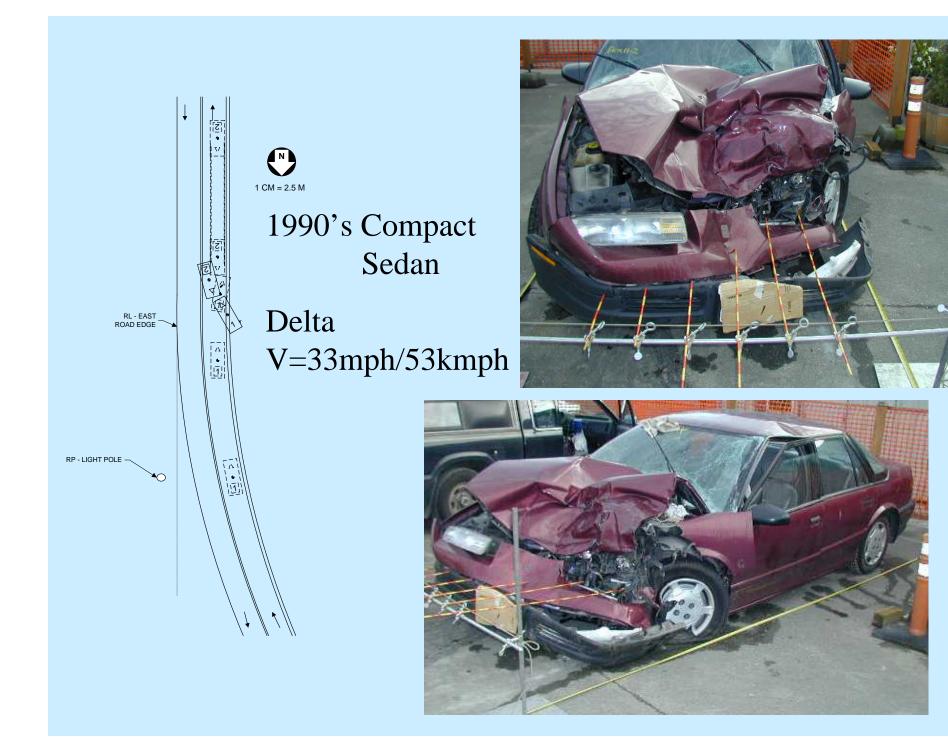


#### Interior contacts





Unrestrained child seat flew forward into center instrument panel resulting in a serious head injury



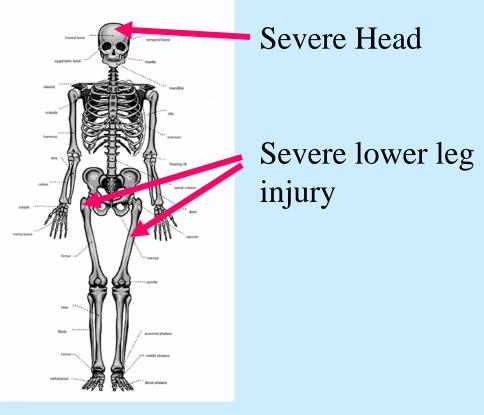


Child less than one year old Infant rear facing\5 pt. belt

Flipped forward (backwards for child seat) and then found flipped to the right and on to its side

#### **INJURIES**

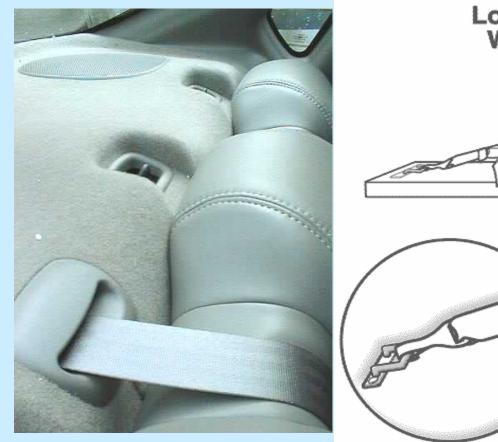




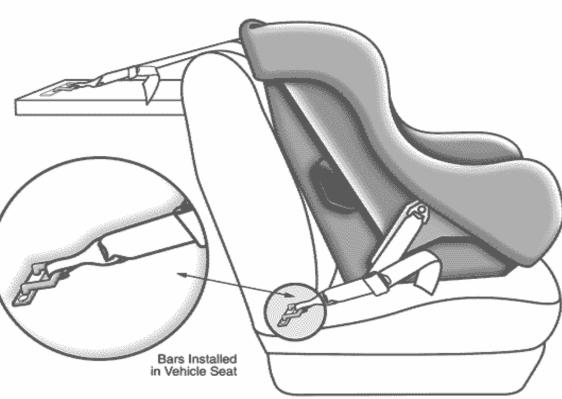
## Addressing Car Seat Issues

- Incompatibility and incorrect usage
  LATCH anchorage system
- 100 % of vehicles manufactured on or after Sept. 2002 must have lower anchorage
- Sept. 2000 100% tether anchorage required

## Tether and LATCH System



Flexible 2-Point Lower Attachment With Top Tether



# Frontal Impacts

Forward-Facing Child Seats

Lower Extremity Fractures

#### Crash Test – Feet protrude forward



A loosely installed child seat and harness straps will increase the lower extremity extension forward

#### Case Review





#### 1990's Compact Sedan Severe frontal impact

Child less than one year old 2nd Seat Left

Early 1990's Fisher Price model Forward Facing

#### Case Review – Misuse FWD





Early 90's Fisher Price

Adjusted to upright setting

Lap/shoulder restrained without locking clip Child buckled in straps – should be rear-facing



#### Case Review – Misuse FWD



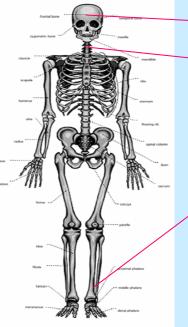




Scuff mark on driver's seat back Belt webbing mark – no locking clip used

## Injuries





Minor Head and Neck Injury

#### Lower leg fracture

## Research on Lower Extremity Injuries in FWD facing car seats (1-4 year olds)

"Crash Analysis of Lower Extremity Injuries in Children Restrained in Forward-Facing Car Seats During Front and Rear Impacts" T. Bennett MD, Robert Kaufman BS, Melissa Schiff MD MPH, Charles Mock MD PhD, Linda Quan MD

#### IN PRESS – Journal of Trauma (submitted 12-2004)





### Children (1-4 yr.) Lower Extremity Fractures Research Summary

- CIREN Evaluated Detailed Case Reviews
- 11 cases meeting criteria (1-4yr., frontal impacts)
  - Sources of lower extremity fractures
    - Three fourths involved contact with interior surface ahead of child with over half assigned to the seat back
  - 3 children only using lap or lap/shoulder belt
  - Average Delta V = 29 mph, 46 k/mph

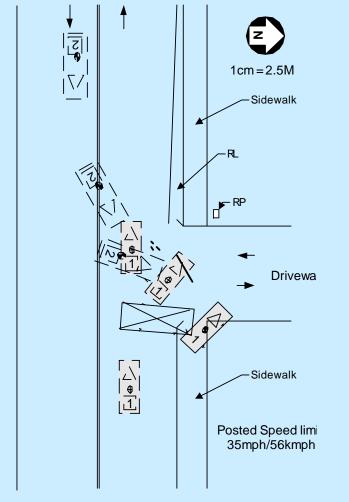
### Children (1-4 yr.) Lower Extremity Fractures Research Summary

- National Automotive Sampling System Review
  - 15 children (1-4yrs.) In-line impacts
    - Seatback support sourced to two thirds
    - Lower extremity fractures 8 femur, 5 tibia/fibula, 2 ankle
    - 14 of 15 involved had a fatality or hospitalized occupant due to injuries.
    - Mean Delta V -40kmph/25mph

# Frontal Impacts

### Misuse of Forward-Facing Child Seats

# Case Review Child Seat Misuse





1990's Compact Sedan Case occupant - 2<sup>nd</sup> row left 2-year old - FWD facing child seat

## Exterior Crush



Crush extends down left side with lateral intrusion occurring to left near-side seated positions

# Child Safety Seat

- Forward-facing Evenflo car seat with a 5-point harness secured with a retainer clip
- No locking clip used





## **Contacts and Lateral Intrusion**



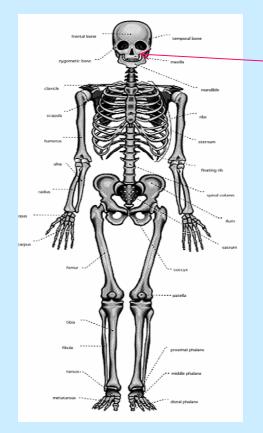
## Pre-impact Location of Child Seat



# Forward movement of child seat matched to contact marks on door



# Injury Summary



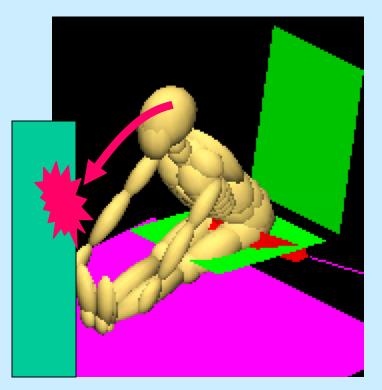
#### **Face/Head – Moderate Injuries**



# Frontal Impacts

4-8 year oldsBooster positioning

# Lap only restraint/Shoulder belt behind back in frontal impacts

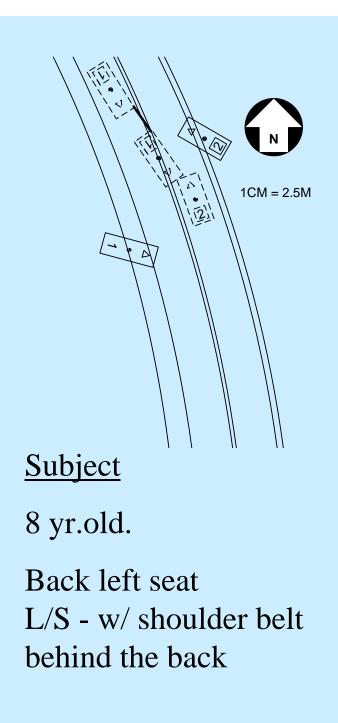


# **Body buckles forward and head/face contact interior surface in front of seating position**

# Subject Vehicle



1990's Compact Sedan Moderate frontal impact







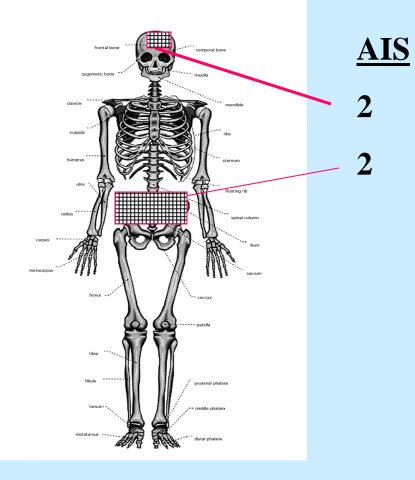
### -Head contact

#### - Shoulder behind back





# Injuries





Moderate injury to the face

Multiple moderate injuries to the abdomen

# Belt Positioning Booster Seats

- Recommended for children 4-8 years old; 40-80 pounds
- Moves belt down off abdomen and neck
- Decrease the risk of head contacts and injury



### **CIREN** Case Review



<u>Subaru</u>

4 yr. child, 2nd Left

Low back booster with lap and shoulder belt

## Case Review



4 yr. Old Booster Seat w/ Lap/Shoulder belt



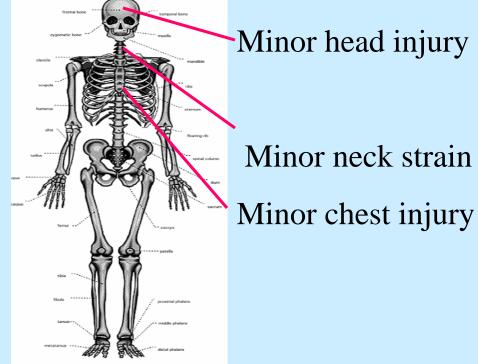
Cosco Booster

# Injuries



4 yr. old

Booster Seat w/ Lap/Shoulder belt



# Child seats reduce risk of injury

- When used correctly, child safety seats are
  - 71 percent effective in reducing fatalities;
  - 67 percent effective in reducing the need for hospitalization; and
  - 50 percent effective in preventing minor injuries.

### Source- NHTSA

# Triage for Children in Crashes Assessing Misuse and Mechanism

- Any external marks to the child face/head
- Near-side impacts
  - Assess height of impact and door intrusion location into head or body
- Frontal impacts
  - Was another occupant in the crash critically injured /or dead
  - And/or significant frontal crush or A-pillar movement
  - Child in appropriate child seat, use of restraints correctly
- Rear or forward facing child seats
  - Is the child seat still firmly secured to the seatbelt
  - Is the harness snug and retainer clip used and positioned mid-chest
  - Examine lower extremities