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INTRODUCTION AND OBJECTIVES

GAIA (Abuse Childhood and Adolescence Group) is a health service created in 2007 at Meyer Children Hospital composed of a multidisciplinary team specialized in the management of children victims of suspected child abuse.

Sexual abuse occurs when a child is engaged in sexual activities that the child cannot comprehend, for which the child is developmentally unprepared and cannot give consent, and/or that violate the law or social taboos of society. The sexual activities may include all forms of oral-genital, genital, or anal contact by or to the child, or non touching abuses, such as exhibitionism, voyeurism, or using the child in the production of pornography.

Physical findings are often absent (> 90% of cases). A meta-analysis of 2015 on the prevalence of child sexual abuse across the world found an overall rate for girls being more than twice of boys. Up to one-third of child sexual abuse is perpetrated by family members. For extrafamilial sexual abuse the perpetrators are usually well known to child victims and parents, only in 5% of the cases the perpetrator is a stranger.

OBJECTIVES

The aim of the study is to describe our experience about children seen for suspected sexual abuse.

METHODS

Retrospective review of medical records over a 5-year period, from January 2011 to December 2015. The gynaecological examination was performed both supine frog-leg position and the prone knee-chest position with labial separation and traction.

RESULTS AND CONCLUSIONS

Over the last five years we have evaluated 385 cases of child abuse of which 96 was suspected sexual abuse. Results are expressed in average and deviation standard or percentage.

The age ranged from 3 months to 17 years, with an average of 8.29 +/- 4.44 years. 70 cases were female (72.9%) and 26 were male (27.1%).

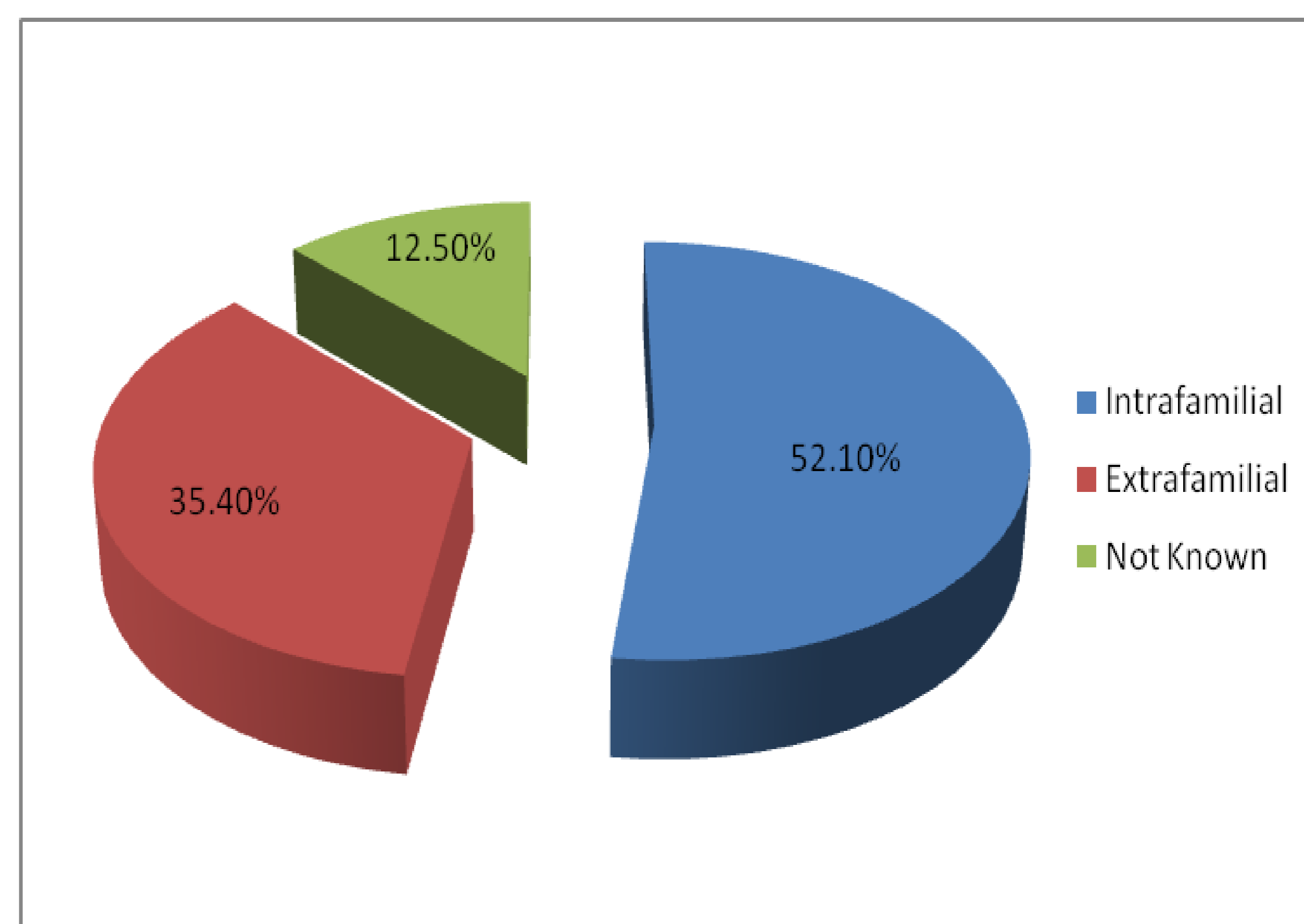
Where a perpetrator was described, 52.1% were intrafamilial with no statistically significant difference between cohabitant or non-cohabitant members. Considering the intrafamilial group 26% of cases was the father, 18% was the step-father and 35.4% was a non-cohabitant relative. 35.4% of offenders were extrafamilial but only in 10 cases (10,4%) were strangers.

In 45 cases (46.8%) the physical examination was perfectly normal and in 47 children (49%) we found non specific symptoms like erythema of the genital tissues, increased vascularity of vestibule and hymen or anal fissure. Medical findings diagnostic of sexual abuse were found in only 4 cases (4.2%): 3 adolescent girls with hymen transection and an adolescent boy with anal bleeding and bruise.

The type of abuse was genital fondling in 42.7%, digital penetration in 7.3%, vaginal or anal penis penetration in 11.5%, penetration with an object in 5.1% and others in 8.3% of cases. In 29.1% of children the type of abuse is non known. Another important result is that in 7.3% of cases the abuse was of multiple types.

Our data, both demographics and physical symptoms are concordant with the literature. In particular females are more likely to be abused and the most affected age group is the pre-pubertal one (5-9 years). In most of 90% cases (95.8%) physical examination revealed no specific signs of sexual abuse. Diagnostic findings are more likely to be found in adolescent girls.

Age (years)	N° of cases	% of Total
0-4	27	28.1%
5-9	36	37.5%
10-13	18	18.8%
14+	15	15.6%
Total	96	100%



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