

established. The public audition conclusions, guidelines and a scope report, have been published by the French National Authority for Health [1,2].

Objectives.— To promote these conclusions among professionals, as well as in the general public.

Method.— Two websites have been created by the “Ecole de l'Image des Gobelins”. The first one (www.bebesecoue.com) aims at explaining why babies cry and at helping adults to cope with crying. The second one www.syndromedubebesecoue.com aims at helping professionals to acquire better knowledge about the SBS (causal mechanisms, initial symptoms, risk factors, investigations needed, lesions, differential diagnoses, diagnostic criteria) in order to better protect babies.

Results/conclusion.— These websites should help promote good practices and explain that playing with a child is not the same than to shaking him/her and that games are not dangerous.

References

[1] http://www.has-sante.fr/portail/jcms/c_1095929/recommandation-syndrome-du-bebe-secoue.

[2] Laurent-Vannier A, Nathanson M, Quiriau F. Shaken baby syndrome: guidelines on establishing a robust diagnosis and the procedures to be adopted by healthcare and social services staff. *Ann Phys Rehabil Med* 2011;54: 600–25.

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P028-e

Descriptive analysis of the initiation activity handisport to children's hospital of Saint-Denis de la Réunion

S. Burlot^{a,*}, F. Chopin^a, M. Mangataye^a, A. Sutter^a, A. Amacouty^b

^a Service de MPR pédiatrique, hôpital d'enfants, rue Antoine-Bertin, 97400 Saint-Denis, Reunion

^b Comité régional handisport, Reunion

*Corresponding author.

E-mail address: sbmessage@gmail.com.

Keywords: Disability; Disabled sports; Child; Patient education; Reunion Island

Objective.— To show the interest of the disabled sports initiation, as a therapeutic activity and physical education in a pediatric MPR services and in partnership with the regional disabled sports. We want to share our experience of the group “Handi'Hôp”.

Materials/patients.— We include 4 to 10 children hospitalized in pediatric MPR session. The pathologies involved are numerous: cerebral palsy (or followed by postoperative), severe burn, neuromuscular diseases, traumatic brain injury, paraplegia, quadriplegia, Strumpell Lorrain, juvenile chronic polyarthritis, amputation of member, osteogenesis imperfect. The animations performed are selected according to the possibilities of the group of children and therefore their pathology.

Methods.— Inclusion is proposed by therapists from the hospital, validated by doctors with the consent of families. The introduction to the practice is carried on handisportive 2 h weekly rehabilitation. Two sports are practiced on sessions 4 to 5 sessions. An evaluation is conducted to see the gains in the sessions. A medal presentation held at the end of the session and a proposed link with the regional wheelchair is formalized. The frame is composed of actors medical, paramedical personnel from the sport but also volunteers from clubs affiliated to the F. F. Disabled Sports.

Results.— The collection activity takes place between May 2010 and February 2012. The total number of sessions is 37. The sports practiced are: boccia, course engine, blowpipe, vortex, wrestling, judo, table tennis, basketball, athletics, rifle laser, wheelchair rugby, climbing. We explain our method of assessing children's progress, depending on the sport, as they learn the sport. Some children have perpetuated their gym use. The publication will include a short presentation and Sports Illustrated.

Discussion.— We want to show the interest to make known to the young Handisport with disabilities, its benefits and values. We discuss the protocols in place to sustain the activity of therapeutic education, which is part of the

renewal of the founding link between PMR and practice handisportive, more broadly, partnerships between the hospital and community life.

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P029-e

Etiology of atypical Volkmann's syndrome: restraint by traditional jbira about 5 cases

A. Khadir, M. Elbouchikhi, L. Riah, D. Cherquaoui, F. Lmidmani, A. Elfatimi
Service de médecine physique et réadaptation fonctionnelle, CHU Ibn Rochd, Casablanca, Morocco

E-mail address: drkhadir@hotmail.fr.

Keywords: Volkmann syndrome; Jbira treatment; Rehabilitation

Objective.— Put the item on the particularity of Volkmann's syndrome secondary to treatment with jbira and his rehabilitation treatment.

Materials and methods.— This is a retrospective study of five children with a syndrome Volkmann after jbira collected in the department of physical medicine, university hospital Ibn Rochd, Casablanca on 1st April 2010 to 1st December 2011.

Results.— The average age was 10.22 years, all our patients are male rural, status suffered a closed fracture of two bones of the forearm after a fall, traditionally dealt bandage by a traditional healer (jbira), a complicated syndrome resulting Volkmann within an average of 2 months to a flexion contracture of the wrist and fingers. Answer by epitrochlear muscle disinsertion in four cases and necrosectomy with muscle graft in one case and then sent for rehabilitation. The examination for admission is stiff polyarticular wrist and hand in 5 patients, VAS pain in 4 to 8 and 9 in one case, the total disability assessed by the DASH in average to 90.77. The patients received a daily rehabilitation under regional anesthesia during the first two weeks. After three months the recovery of range of motion and muscle strength was evident, VAS pain increased to 3 in 4 and 5 in one case, total disability from 55% in average. The patient still ongoing rehabilitation.

Discussion.— In our context, the Volkmann's syndrome is a complication, still current, the traditional restraint of upper limb fractures. Once installed, the effects are sources of partial or total permanent disability. Rehabilitation is essential and a great contribution to get a functional and sensitive hand. Collaboration between the surgeon and the physiatrist and the public awareness about the dangers of jbira is essential and highly recommended.

Further reading

Fnini S. Traitement chirurgical du syndrome de Volkmann : 18 cas. *Chir Main* 2011.

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P030-e

A very special case of very serious injury due to meatoplasty, which shows the importance of cooperation between the rehabilitation doctor and a specialised lawyer

F. Metté^a, M.A. Ceccaldi^b

^a Hôpital de Mayotte, BP 04, 97600 Mamoudzou, Mayotte

^b Cabinet Preziosi-Ceccaldi, Mayotte

E-mail address: francois@mette.re.

Keywords: Expertise; Injury; Compensation; Rehabilitation

Objective.— The field of injury has begun quite haphazardly in Reunion and Mayotte Islands. The lack of a competent association of patients has given way to a free rein in practices that leave the wounded in situations of deleterious inequality. Vigilance or the involvement of the rehabilitation colleagues is a must.