

The Spectrum of Intimate Partner Violence-Related Head and Neck Trauma in Married Women: Findings from an Otolaryngology Private Clinic

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Abstract

Background: Intimate partner violence (IPV) is a significant public health issue affecting millions of women globally. There is limited research specifically focused on its presentation in otolaryngology settings. **Objective:** This study aims to explore the spectrum of head and neck injuries among married women presenting with IPV-related trauma in a private otolaryngology clinic, highlighting the importance of recognizing these injuries in clinical practice. **Materials and Methods:** A retrospective analysis was conducted on 118 cases of head and neck trauma among married women in an ear, nose, and throat private clinic over a 15-month period. The cases related to IPV were further evaluated for the perpetrator of violence, type and location of injuries, age of patients, time of occurrence, and treatment. **Results:** Of the 118 cases, 72.8% were related to domestic violence. The most prevalent type of injury is traumatic tympanic membrane perforation, which accounts for 44.2% of all cases. Most cases were observed in women between the ages of 26 and 35. All patients reported their husbands as perpetrators of violence. **Conclusion:** IPV is a significant cause of head and neck trauma among married women, with traumatic tympanic membrane perforation being the most common type of injury. The study highlights the need for increased awareness and prevention of domestic violence, as victims may be reluctant to disclose their experiences or seek help. It is essential to integrate efforts to address domestic violence into broader efforts to promote gender equality and sustainable development.

Keywords: Domestic violence, facial fractures, intimate partner violence, spousal abuse

INTRODUCTION

Domestic violence and intimate partner violence (IPV) are often used interchangeably, but there are differences between the two terms. Domestic violence is a broader term that includes violence within the home, such as violence between family members, roommates, or partners in a romantic relationship. IPV specifically pertains to violence within intimate relationships, such as between spouses, cohabiting partners, or dating partners.^[1] When a partner engages in behaviors leading to sexual, physical, or psychological harm, it is known as IPV.^[2] IPV toward women is recognized as a major infringement on the human rights of women and a notable issue for public health.^[3] IPV can negatively impact the physical, mental, sexual, and reproductive

health of women and children.^[4] Different countries have significantly different rates of IPV against women.^[1] The World Health Organization approximates that from 2000 to 2018, around 30% of women worldwide encountered physical or sexual violence from a partner.^[2] Incidents of intimate partner assault were found to be more common in the United States at 29.8% and in Europe at 25.4%.^[5] Between 2003 and 2005, violence was reported by one out of every three women in Palestine, Egypt, Israel,

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and Tunisia. These figures demonstrate the concerning frequency of IPV toward women in various parts of the globe.^[6] The UN acknowledges the substantial impacts of IPV on health, society, and the economy and has urged for improved data collection on the various aspects of violence against women to eradicate it.^[7] This resulted in the implementation of Sustainable Development Goal (SDG) 5.2 in 2015, which aims to eradicate all forms of violence against girls and women, whether in private or public settings.^[7,8] SDG5.2, backed by many, requires national authorities to monitor and disclose rates of violence against women, including violence by partners (SDG5.2.1). Violence against women in Iraq is a major public health issue. Nevertheless, there is still a noticeable lack of research on this topic. In this research, our objective was to investigate how common and what features head and neck trauma have in married women who have suffered IPV and sought care at our private ear, nose, and throat (ENT) clinic in the last 3 years. Our research contributes to the increasing amount of research on IPV and its impact on women's health, emphasizing the significance of addressing this issue within the framework of SDGs. By pinpointing the distinct injuries suffered by women who have been victims of IPV, we can gain deeper insight into the extent of the issue and strive toward creating successful strategies to combat and tackle this problem.

MATERIALS AND METHODS

This retrospective study included married women who presented to a private ENT clinic in Iraq with head and neck trauma over the period from May 1, 2023 to July 31, 2024. I reviewed and examined each case, and only cases with a clear diagnosis and history of trauma were considered for the study. Cases with incomplete medical records or unclear diagnoses were not included. We included 118 cases in the study, of which 86 cases were related to IPV and 32 cases were related to non-domestic violence causes such as motor vehicle accidents, falls, or sports injuries. The diagnosis and severity of injuries related to IPV were evaluated, and treatment was carried out according to the standard protocol for each type of injury. Information about the patients' demographics, age, kind of injury, site of damage, length of injury, and treatments received was taken from their medical records. Descriptive statistics were used to examine the data, and figures were created to show the findings.

Ethical approval

The research protocol for this study was approved by the Research Ethics Committee of Hammurabi College of Medicine, University of Babylon, issue no. 12, on April 22, 2023. Written informed consent was obtained from all participants before their inclusion in the study.

RESULTS

During the 15-month study period, 118 cases of head and neck trauma were recorded among married women in the ENT private clinic. Of these cases, 86 (72.8%) were related to IPV, while the remaining 32 (27.2%) were not related to domestic violence, but rather to motor vehicle accidents, falls, or sports injuries. Our study further evaluated cases related to IPV. The most common type of injury was traumatic tympanic membrane perforation, accounting for 44.2% (38 patients) of cases, followed by temporomandibular joint (TMJ) disorder at 14.0% (12 patients), nasal bone fractures at 7.0% (six patients), and laryngeal trauma at 9.3% (eight patients). Other injuries included ecchymosis, swelling, and pain sensation of different parts of the head and neck, accounting for 25.5% (22 patients), as shown in Figure 1.

The patients' ages, which ranged from 18 to 53, were 32.4 years. With 36 cases, the age group of 26–35 years had the most cases, followed by that of 16–25 years, which had 32 cases. The age range of 36–45 years contained 15 instances, and the range of 46–55 years had the fewest cases, only three, as shown in Figure 2.

All patients reported that their husbands were the perpetrators of violence. Most of the patients, 56 cases (65.1%), reported experiencing injuries within the previous week, while 25 cases (29.1%) reported experiencing injuries more than a week ago, and five

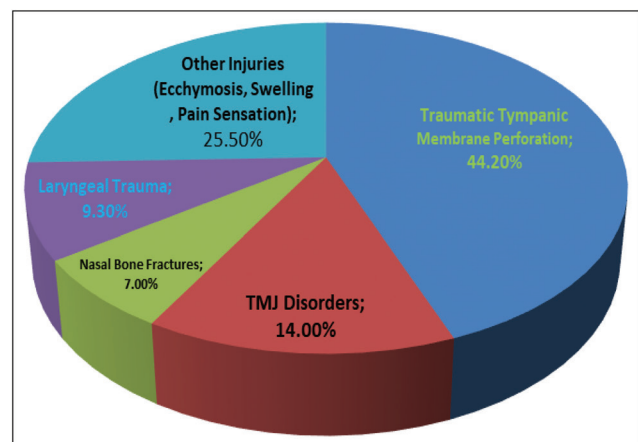


Figure 1: Types of intimate partner violence-related trauma

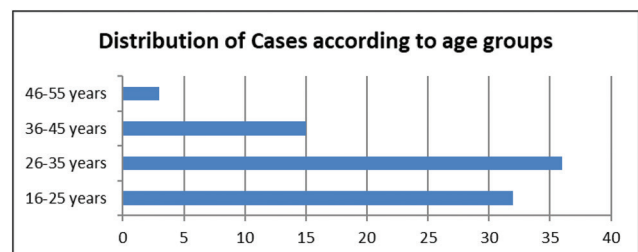


Figure 2: Distribution of cases according to age group

cases (5.8%) reported experiencing injuries more than a month ago. The treatment of the injuries varied based on the type and severity of the injury. Conservative management was used for all cases of traumatic tympanic membrane perforation and laryngeal trauma. For nasal bone fractures, three cases required closed reduction and immobilization with nasal packing, while the rest were managed conservatively. For TMJ disorders, pain relief medication and physical therapy were used for all cases.

DISCUSSION

Domestic violence is a pervasive issue that affects millions of women worldwide, including those living in countries (like ours) with social and religious limitations. In many cases, victims of domestic violence are unable to seek legal ways to obtain their rights due to cultural, social, or religious barriers. This can make it challenging for healthcare providers to identify and respond to domestic violence, as victims may be reluctant to disclose their experiences or seek help. The most common areas of the body injured in IPV are the head and neck from a direct blow to the head,^[9] and unwitnessed head and neck injuries are significant markers for IPV.^[6] During the 15-month study period, our ENT private clinic recorded 118 cases of head and neck trauma among married women, with 72.8% (86 patients) related to domestic violence. This finding aligns with previous studies demonstrating a high prevalence of domestic violence in women seeking medical treatment for trauma. An example is a study in the United States that showed 41% of female trauma patients had prior experience of domestic violence,^[10] while in Saudi Arabia, a study found that 56.5% of female patients with maxillofacial trauma had been victims of domestic abuse.^[11] This suggests that domestic violence is an important issue for public health and that healthcare professionals need to be prepared to identify and address instances of domestic violence. Traumatic tympanic membrane perforation was the most prevalent injury in our research, making up 44.2% of cases with 38 patients, followed by TMJ disorder at 14.0% with 12 patients, nasal bone fractures at 7.0% with six patients, and laryngeal trauma at 9.3% with eight patients. A total of 22 patients experienced various injuries to different parts of their head and neck, such as bruising, inflammation, and pain, making up 25.5% of the total. This finding aligns with previous studies indicating a high proportion of head and neck injuries in instances of domestic violence.^[12] Yet, our research identified a greater prevalence of traumatic eardrum perforations in comparison with other studies, possibly attributable to the increased incidence of physical assault on the head within our study group. In our study population, the majority of cases (36) were in the 26–35 age group, with the 16–25 age group coming in second with 32 cases. This aligns with previous studies indicating that domestic violence is more

prevalent among younger women.^[13] Nonetheless, our research included a lower percentage of elderly women in comparison with other studies, possibly indicating that older women are less inclined to seek medical assistance for violence-related injuries.

All patients in our research study stated that their husbands were the ones committing violence against them, which aligns with previous research showing that intimate partners are the main perpetrators of domestic violence.^[10] The majority of patients stated that they had sustained injuries in the past week, emphasizing the acute nature of injuries related to IPV. The management of injuries differed depending on the type and severity, utilizing conservative treatment for all instances of traumatic tympanic membrane perforation and laryngeal trauma. Three nasal bone fractures needed closed reduction and nasal packing under general anesthesia, whereas the others were treated conservatively. Both pain relief medication and physical therapy were utilized for all cases of TMJ disorders. These findings align with previous studies suggesting that conservative management is the primary treatment option for head and neck trauma in domestic violence cases.^[14]

In relation to sustainable development, our research underscores the concerning rate of IPV and its effects on women's health. In 2015, the UN General Assembly approved Goal 5 of the SDGs: This goal targets the elimination of all forms of violence and discrimination against girls and women. Additionally, Goal 3: Good health and well-being aims to foster health and well-being for everyone, irrespective of their age.^[8] Our research underscores the importance of enacting policies and programs that tackle domestic violence and its health consequences for women. Numerous studies have underscored the connection between domestic violence and negative health effects for women. A study conducted in Pakistan revealed that women who faced domestic violence exhibited a greater occurrence of physical and mental health issues in comparison with those who did not.^[15] Additionally, research by Ellsberg *et al.*^[13] indicated that IPV correlates with women's physical and mental health challenges. A different study was conducted by Garcia-Moreno *et al.*^[16] highlighted the challenges of connecting with victims/survivors of IPV and helping them access available services. Kaur *et al.*^[17] identified various factors related to domestic violence against women in India through a cross-sectional analysis. A different study carried out in Bangladesh indicated that women who experienced domestic violence were more likely to encounter gynecological issues, such as pelvic inflammatory disease and vaginal discharge.^[18] These results align with our findings, which indicated a high incidence of head and neck trauma among women who faced domestic violence. Such studies emphasize the importance of healthcare professionals recognizing and

addressing domestic violence, as it can greatly affect women's health. Regarding policy and programmatic initiatives, there is evidence that gender-based violence prevention programs can be effective in decreasing the occurrence of domestic violence. A review of initiatives in low- and middle-income countries indicated that community-centered strategies that involve both men and women in challenging gender norms and fostering gender equality can effectively decrease violence against women.^[13] Healthcare professionals have the potential to significantly contribute to the identification and management of IPV.^[19]

CONCLUSION

This study highlights the high prevalence of head and neck trauma among married women being related to IPV. The most common type of injury was traumatic tympanic membrane perforation, followed by TMJ disorders, nasal bone fractures, and laryngeal trauma. The age range of 26–35 years was found to have the largest number of instances, and all patients reported their husbands as perpetrators of violence. The study also highlights the importance of addressing this issue in the context of the SDGs. Furthermore, this study emphasizes the importance of further research on the prevalence and impact of IPV on women's health, as well as the development of interventions and policies to prevent and address IPV.

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Conflicts of interest

There are no conflicts of interest.

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