Violent death is caused by the action of certain external traumatic factors on the organism, which can have mechanical, physical, chemical, biological, mental nature or caused by the activation of an inhibitor reflex. This study concerns the situation of the minors related to the above presented information.

Among the multiple and severe cases presented to the medical services, there is a certain number of abused children. Maltreating can be of physical, sexual, emotional nature, or can be the result of carelessness.

The analysis of the death codes for violent death in Bistrita-Nasaud county, realized by the Bistrita-Nasaud Public Health Department using the data base from the last five years (between 01.01.2010 and 31.12.2014), releases that out of the 667 cases of death by violent death, 6.3% were registered among minors. The analysis shows that masculine gender was mostly affected in a proportion of 66% of the cases.

The majority proportion of deceases caused by violent death at the minors who have had a necropsy in Bistrita-Nasaud county in the last five years is due to car accidents (40%). In the other cases, the carelessness of the parents could lead to an unfavourable context in which the life of children was suppressed (drowning, carbon monoxide intoxication, mechanical asphyxia with vomit liquid and, partly, even the circulation accidents). And the direct guilt of the adults was quantified by the number of physical force (murder) aggression cases.

Keywords: violent death, minors, negligence, death codes, accidents

parents must be willing to accept this. In a similar way, if the disease is serious or incurable, the history must give birth to a sense of confidence, and the child feel safe as long as he can [2].

PURPOSE
During this study, from the perspective presented above, we have focused on the analysis of the causality of violent death among minors.

RESEARCH OBJECTIVES
The main objective, followed in this study, is to identify the frequency of violent deaths among minors and to detect tanato-generating mechanisms, respectively the context in which they occurred, to raise awareness of the situation and substantiation of health policies, informing specialists in the field and identify the measures that prevent them, combat the abuse of children neglecting, so that the share of violent deaths of minors to fall as much as possible.

METHODOLOGY
The present study is a cross sectional study, conducted on secondary data conducted and included in statistics from the Department of Statistics (Statistical bulletins of death) of Bistrita county, statistics containing the coding of death causes, coding made on the level of Health Public...
Inclusion criteria: were used all the statistic death bulletins on the county level, the minor representing the child under the age of 18.

The death codes for the violent deaths are more complex (including the affection that determined the death and also the circumstances of its installation), are identified separately by the others deaths and are centralizing regarding the monthly report at the Health Ministry, representing a database at the county level (coding register for violent deaths). Using the database made, were counted the cases of violent deaths registered on minors, subsequently being made a hierarchy in descending order of the causes of death [3].

The rapid assessment of a child situation who is in a serious condition should be made in less than a minute, for the treatment to avoid the progression of grasp exitus. In these cases the etiology can be diverse. Among the many serious cases presented to the medical services, there is a number of cases of abused children. The mistreatment can be physical, sexual, emotional, or can be the result of negligence. The risk factors in this case can be represented by: the birth weight less than 2500 grams, the mother’s age under 30, unwanted pregnancy, stress, social class of IV-V type.

The mistreatment is suspected when:

- Is mentioned by the child.
- The history of the disease is not credible.
- The submission is late, eventual at an unknown doctor.
- The adult accompanying the child is not his parent
- Efforts are made to avoid a complete examination
- There are unexplained injuries or fractures in the buttocks, perineum or face.

Are examined according to the presentation, the eyes too (to see if retinal bleeding occurred or vitreous body, the dislocation of lens), considering fontanel’s, is measured the circumference of the head, is looking for signs of the type made by cigarette burns, the traces of whipping, traces of belt buckles, the loop made of an electric cable. Is there in these cases the possibility of some memorable problems?

- Is the possibility as the proof of the abuse to have a more destructive effect than the abuse itself?
- It is better for the child to be loved and beaten, the no one of them?
- Is the help of the family more desirable than the law enforcement?
- It is possible for the parents to overcome the crisis if the mistreatments are discovered and help is offered to them?

With all the efforts made, there is progress towards. The imminent death is always a difficult topic to approach by the doctor- and it is even more difficult when we are speaking about a child. Even the death in the childhood is a very rarely event in the present, are very few the mothers who didn’t think at the possibility that their child can die from a cause or another. No further than the death syndrome of the child that we know to be the main cause of death regarding the children. In fact the main characteristic of this syndrome is the absence of any identifiable cause of death. The theoretical data show that the greatest incidence is between 1 and 4 months. The incidence is bigger on the inferior classes from a socio-economic point of view, on passive smokers, male children, premature babies, during the winter, in case there exist minor infections of the upper respiratory pathways [2].

For the analysis of this study were calculated frequency indicators (the share of violent death on minors from all the deaths, but also the share of violent causes from all the violent deaths on children), with the help of the software MO Excel.

RESULTS

The analysis of the death codes through violent death in the county Bistrița-Nasaud, analysis made at the Public Health Directorate Bistrița-Nasaud using the database from five years ago (between 01.01.2010-31.12.2014) underlines that, 6,3% from all the 667 cases of death through violent death were cases registered on minors, Figure 1.

Gratifying is the fact that from the total of 42 cases of violent death on children in the period of 5 years, it was noticed an annual decrease of their rate, from a maximum number of 12 death/year in 2011 and 2012, to only 6 death/year in 2014.

Fig.2
From the analysis results that they affected more the male sex, in 66% of the cases. Fig.3

**DISCUSSION**

Analysing in detail the causes that led to deaths through violent death on minors from Bistrita-Nasaud county, are highlighted the following causes more frequent in the last 5 years:

- T07/V892- Multiple traumatic injuries/ Person hurt in a driving accident with motor vehicle.
- T17/W78- Strange body in the respiratory pathways/ Inhalation of stomach contents.
- T58/X47- Toxic effect of carbon monoxide/ Accidental intoxications through exposure to other gases and emissions.
- T17/W69- Strange body in the respiratory pathways/ Drowning and submersion in natural waters.
- S71/Y04- Open wound/ Aggression through physical force

From the frequency point of view, there are imposed various codes: Table, Figure 4.

The distribution of cases by age group shows that the most death of violent cause produce on younger age groups, who are subjects to more accidents, thanks to especially, to the parents negligence, but also to the older group age, when the majority of deaths are provoked by car accidents, the minors from this group having a degree of freedom bigger so that they are moving frequently with means of transport or like pedestrians, to/from school, and so on. Gratifying is the fact that in the studied period was not registered any violent death at new-born.

**CONCLUSIONS**

In conclusion, the majority share of violent deaths on autopsied minors in Bistrita-Nasaud County, in the last five years, is realized by car accidents [5]. For the other cases, the negligence of the adults (most of the times leaving children unsupervised, to play or imprisoned in the house), constitutes an unfavourable context where the children’s life was suppressed (drowning, intoxication with monoxide carbon and in part even car accidents). A special situation, specific for the new born, is represented by Mexican asphyxia by aspiration of regurgitated milk, situation that appears in the case of younger mothers, from the rural, with a low sanitary education or affected by the consume of alcohol or psychological diseases. The direct fault of the adults was increased in the number of aggression cases through physical force. (murder)

Taking into consideration these aspects we consider that the implementation of some public health policies in order to decrease the phenomenon of the adults negligence, reported to the minors of low age, by raising the level of sanitary education and even the culture level, in general, can contribute in a significant way to the reduce of the violent deaths. The association with other institutions like The General Directorate of Social Assistance and Child Protection can create the prerequisites for success in order to reduce this phenomenon.

Regarding the deaths through car accidents, on national plan, they create the second cause of death, after cardiovascular diseases, with all the prevention and decrease campaign organized by the structures of different ministries involved.

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*Accordingly with ICD10 [4]