Skin Branding in Indian Children: A Still Prevaling Superstition in the Modern Era

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None
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Introduction

Human branding is the process in which a mark is burned into the skin of a living person, resulting in permanent scarification. This is done either with consent as a form of body modification; or under coercion, as a punishment. It may also be practiced as a “rite of passage” such as within a tribe, or to signify membership in an organisation. The most commonly seen brand marks in a pediatric practice is because the family members believe that it helps in evading or treating the offending agent.

HISTORICAL SIGNIFICANCE:
The etymology of the word “brand” could be traced back to 12th century Norse brena which meant “to burn, to light”. In Dutch, branden means “to burn”, brandmerk a “branded mark”[1]. In ancient Rome slaves who tried to escape were branded with the words FUG- denoting Fugutives. During the medieval period of the middle ages, branding was one of the main ways of torturing or punishing prisoners. Army deserters used to be branded during the American Civil War [2].

Discussion

Branding as a prevention or treatment for many diseases is a still prevalent superstitious practice in many rural areas of India. The family members usually believe that the offending agent comes out of the brand site ridding the body of the disease [3]. The practice starts when the child is still in the neonatal period to treat physiological jaundice [4, 5]. It continues well into late adolescence and sometimes even into adulthood. The child is taken to a local traditional healer who administers the brand mark on different parts of the body based on where he thinks is the place where the disease lurks. The most commonly used instrument is the tip of a hot metal rod. Other objects like heated nails, wires, incense sticks and hot bangles can also be used to brand the child. The forehead, face, chest wall and abdomen are the usual sites of branding. The children usually belong to a poor illiterate rural family where branding is a continuing tradition prevalent through many generations [6].

Branding is similar to a 2nd degree burn. It goes through all the stages of healing leading to a keloid formation. The nerve endings might be exposed leading to loss of pain receptors. Different materials like honey, dung or even ash is applied to the burnt area which might lead to infections and fatal sepsis in younger children. Some children who have a genetic tendency for scarification present with extremely large and cosmetically ugly looking keloids. There is a small but significant chance of the child getting infected by hepatitis B or HIV if the instruments are not sterilised properly. It is not uncommon to find many children with brand marks on different parts of the body in the usual pediatric outpatient clinic.

Branding is a type of child abuse and should be condemned by the society. Every measure should be taken to educate the rural families against this inhumane, medieval custom. Recently the National Human Rights Commission (NHRC) took a suo motu cognisance of a media report alleging that children in Vagad region of Kutch district and some remote parts of Rajkot district in Gujarat were branded with iron rods and observed that it raised a serious issue of violation of human rights of children [7].

References

2. The middle ages website: Branding and Burning tortures.
Illustrations

Illustration 1

Fig1. Circular brand mark around the umbilicus in a child with abdominal pain

Illustration 2

Brand mark on the forehead in a child with headache
Reviews

Review 1

Review Title: Skin Branding in Indian Children: A still prevailing superstition.

Posted by Dr. Praveen S Bagalkoti on 25 Jan 2012 04:29:21 PM GMT

| 1 | Is the subject of the article within the scope of the subject category? | Yes |
| 2 | Are the interpretations / conclusions sound and justified by the data? | Yes |
| 3 | Is this a new and original contribution? | No |
| 4 | Does this paper exemplify an awareness of other research on the topic? | No |
| 5 | Are structure and length satisfactory? | Yes |
| 6 | Can you suggest brief additions or amendments or an introductory statement that will increase the value of this paper for an international audience? | No |
| 7 | Can you suggest any reductions in the paper, or deletions of parts? | No |
| 8 | Is the quality of the diction satisfactory? | Yes |
| 9 | Are the illustrations and tables necessary and acceptable? | Yes |
| 10 | Are the references adequate and are they all necessary? | Yes |
| 11 | Are the keywords and abstract or summary informative? | Yes |

Rating: 5

Comment:
1) The topic is relevant. Skin branding of children is prevalent in many parts rural areas of India. The commonest objects used for branding is hot metal wire or incense sticks. The studies are lacking which parts of child is more commonly used for branding.

2) Though the practice is observed in poor illiterate communities, who among the family member plays influential role in skin branding of the child? Lack of reporting on this issue, I feel it is the grandparents or elders of family.

3) Further studies are required to know what percentage of skin branded children will have ugly keloids?

4) Reports are lacking regarding transmission of HIV or Hepatitis B infection among skin branded children by use of unsterilized instruments?

5) There are reports of squamous cell carcinoma developing at the sites of branding in cattle and sheep (1), and this needs to be evaluated in children too.

6) The stress is needed on the fact that the branding is a criminal offence under Indian Penal code -324 (2).


8) Steps needed to reduce the incidence of skin branding in children like public health education, provision of better health services, use of social and political resources and administrative and judicial actions. (2)

9) Most of the parents interviewed were also branded in their childhood, and there is a tendency for this practice to be followed through generations.

References:


3 Adhivasam B, Gowtham R. Branding treatment of

Competing interests: None

Invited by the author to make a review on this article? : No

Experience and credentials in the specific area of science:
In our day today practice of General paediatrics, I do encounter children of rural area with skin branding for monorillness like respiratory tract infection to serious illness like convulsion, encephalitis and bleeding of any etiology.

Publications in the same or a related area of science: No

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