

SIDS DEFINED

SIDS is defined as: the sudden death of an infant under one year of age which remains unexplained after a thorough case investigation, including performance of a complete autopsy, examination of the death scene and review of the clinical history. Cases failing to meet the standards of this definition, including those without postmortem examination should not be diagnosed as SIDS. (National Institute of Child Health and Human Development, 1989.)

Is SIDS a new medical disorder?

No. Though extensive research has been conducted over the years, there still are many unanswered questions about this silent killer. Through recent biomedical and epidemiological research, the following facts are known:

- SIDS is not hereditary
- SIDS is not contagious
- SIDS is the number one cause of infant mortality in the United States between the ages of 1 month and one year of age
- SIDS occurs at a rate of about 0.8/1000 live births
- Approximately 2500 infants die of SIDS every year in the United States
- SIDS is not caused by vomiting or choking
- SIDS cannot be predicted
- SIDS occurs among families of all social and economic levels
- SIDS is nobody's fault.

CHARACTERISTICS OF SIDS

Age at death

90% of SIDS cases occur before 6 months of age. 10% occur between 6 and 12 months of age.

Sleep

All infants are found during a sleep period. 80% of the infants are found between midnight and noon.

SIDS is a silent death

In those cases which have been observed, the infants do not cry and there is no struggle.

Time of year

Historically, the SIDS statistics always have shown a distinct seasonality, with higher rates recorded during winter months, which may be due to increased infections that are known to be more frequent during cold weather. (about 40% of SIDS cases have an upper respiratory infection) A significant decrease has been observed in the seasonal association of SIDS as the prone sleep position has decreased and SIDS rates have declined.

Sex of infant

Male infants are slightly more susceptible to SIDS than females. However, this also is true for most diseases affecting infants and children.

Risk factors

Prematurity, low birth weight, maternal substance abuse, maternal smoking, exposure to second hand smoke, little or no prenatal care, young maternal age and stomach sleeping are considered risk factors for SIDS. Fifty percent of the infants who die of SIDS do not have or are not exposed to any risk factors. These risk factors are not unique to SIDS, but are present in other infant deaths. SIDS cases have declined 40% following the recommendation that infants should be placed to sleep on their backs.

COMMON MISCONCEPTIONS

Immunizations and SIDS

Over the years many questions have been asked about the Diphtheria-Pertussis-Tetanus (DPT) immunization and SIDS. SIDS is not caused by the DPT immunization. The National Institute of Child Health and Human Development (NICHD) published its definitive report on DPT and SIDS in 1987. The data clearly showed that there is no causal relationship between SIDS and the DPT immunization.

Aspiration of Feeding

Because many SIDS infants have been fed within hours of death, aspiration of milk/formula was suspected. The autopsy examination has shown that any aspirated feeding is related to attempts at resuscitation when the infant is found.

Breast feeding vs. Bottle feeding

SIDS cannot be prevented by breast feeding. Recent research shows that SIDS occurs in breast-fed, as well as bottle fed babies. However, breast-feeding is encouraged because breast milk provides natural antibodies to the infant's immune system.

Suffocation

Accidental suffocation can occur by entrapment of the head or body in a broken crib; occlusion of the nose and mouth by a thin plastic sheet (e.g. garment cleaning wrap). The potential for suffocation exists on soft fluffy sleeping surfaces (e.g. a pillow), and the best advice is to avoid them. Similarly, a sleeping baby should not be restricted by heavy clothing, bulky blankets or tightly tucked in sheets.

Apnea Monitors

The NICHD stated in a 1987 consensus statement on apnea monitors that there is no evidence to suggest home monitoring can prevent SIDS deaths. Apnea monitors are not recommended for normal healthy infants.

SIDS FACTS:

How is the SIDS diagnosis made?

The coroner/medical examiner makes the diagnosis based upon information obtained from the medical history, circumstances of death and autopsy examination.

Why is an autopsy critical?

Sudden and apparently unexplained infant deaths can mimic SIDS. In any 100 infants who die suddenly and unexpectedly, about 20 deaths will be explained by a complete autopsy (including microscopic examination). A child with myocarditis, a viral infection of the heart muscle, can seem well and yet die within hours. Pneumonia also can take the life of a baby within hours. At autopsy, these deaths can be explained. Most of the 80% that cannot be explained, and which fit the SIDS criteria, are diagnosed as SIDS.

What can parents do to reduce the risk?

- Pregnant women should get early and regular prenatal care.
- Avoid smoking and exposure of their infant to second hand smoke.
- Avoid the use of alcohol and other non-prescribed drugs.
- Healthy babies should sleep on their backs.
- Bring their infant in for regular well-baby checks.
- Keep the temperature in the baby's room at a comfortable level.
- Have the baby sleep on a firm sleep surface.
- Parents should avoid stuffed animals, fluffy comforters and pillows in their infant's sleep area.

SIDS FACTS:

Is SIDS likely to repeat in families?

No. The chance of a subsequent infant dying of SIDS or explained causes is usually associated with pregnancy and newborn risk factors (e.g. maternal smoking, maternal substance abuse, premature or low birth weight babies).

Whom can I contact for more information?

The Infant Death Center of Wisconsin is a statewide program whose purpose is to provide information, counseling and support to families whose infants have died suddenly and unexpectedly. Additionally, the Center aims to increase awareness of SIDS and other causes of sudden and unexpected infant death, and to educate professionals and the general population about SIDS, risk factors leading to infant mortality, the grieving process and current research efforts.

For more information regarding Sudden Infant Death Syndrome, helping someone who is grieving the loss of an infant, or resources in your area call:

Infant Death Center of Wisconsin

Central office: 999 N. 92nd St., C630A
PO Box 1997
Milwaukee, WI 53201
(414) 266-2743

Satellite offices:

Neenah: (920) 969-7903

Wausau: (715) 843-1877

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Sudden Infant Death Syndrome

THE FACTS

