



Sudden Infant Death Syndrome

By Louise Parks

One of the hardest situations to deal with is the death of a child in your care. The death of an apparently healthy, sleeping baby causes anguish that ripples through the child care community. It is highly unlikely that you or any caregiver you know would be accused of abuse that causes a child's death. It is, nevertheless, essential that you be aware of the risk factors and prevention measures related to Sudden Infant Death Syndrome (SIDS).

Sudden Infant Death Syndrome is the diagnosis given for the sudden and unexplained death of a baby younger than one year of age. Because most cases of SIDS occur when a baby is sleeping in a crib, it is often referred to as crib death. SIDS is the major cause of death in infants between the ages of 1 and 12 months. More boys than girls are victims, and most deaths occur in cold weather.

After 30 years of research, scientists cannot find one definite cause or causes of SIDS. There is no way to predict or prevent SIDS. There are, however, some things that you and others who care for infants might do to reduce the risk of SIDS.

Causes and risk factors

One of the most important things that you can do is to put babies to sleep on their backs. Do this every time you put a baby to sleep for a nap or the night. Babies who sleep on their stomachs are more likely to die of SIDS than those who sleep on their backs.

Mothers who smoke during pregnancy are three times more likely to have a SIDS baby, and exposure to passive smoke doubles a baby's risk of SIDS. Other risk factors include mothers who are younger than 20 at the time of their first pregnancy, babies born to mothers who received late or no prenatal care, and premature or low-birth-weight babies.

Recent studies have found that some SIDS babies are born with a brain abnormality that is involved in controlling breathing and waking cycles during sleep. Other contributing factors may include lack of oxygen, excessive carbon dioxide, overheating, metabolic disorders, or infections. For example, infants with respiratory infections may find it difficult to inhale fresh oxygen and exhale carbon dioxide. Or they may rebreathe exhaled carbon dioxide trapped in excessive bedding. Normally, sleeping infants sense inadequate air, and their brains trigger them to wake up and cry. Babies with a flawed warning mechanism do not wake up and may die of SIDS.

Reducing the risk of SIDS

Good prenatal care for mothers might help prevent developmental abnormalities or low birth weight that could put an infant at risk for SIDS. This care includes eating nutritious meals, refraining from smoking, drugs, and alcohol, and having frequent medical check-ups.

After birth, babies should be in smoke-free environments and have regular medical check-ups with immunizations on a recommended schedule. Babies and young children exposed to smoke have more colds and other diseases. Some parents fear that immunizations increase the risk of SIDS, but, in fact, children who receive routine immunizations are less likely to die of SIDS.

In general, parents and caregivers should put babies to sleep on their backs (supine position)-not on their stomachs (prone position). Research has shown that placing babies on their backs to sleep has reduced the number of SIDS cases by as much as half.

Adults sometimes place infants to sleep in a prone position because they think it prevents the baby from choking on spit-up or vomit during sleep. There is no evidence of increased risk from choking. In some instances, doctors may recommend that babies sleep in a prone position. This may be because of specific respiratory or digestive disorders. Wise caregivers ask for a signed order from the child's doctor if the child is to sleep in a prone position. There is evidence that soft sleeping surfaces increase the risk of SIDS in infants who sleep in a prone position. If a child's doctor instructs you to put a baby to sleep in a prone position, make sure to use a standard, firm infant mattress with a sheet between the infant and the mattress. If you want to use a rubberized pad, make sure it is placed between the sheet and the mattress and is well tucked in.

The recommendation for the supine sleep position does not mean that infants should never be on their stomachs. Infants need to have daily tummy time to develop arm, shoulder, and neck muscle strength. Crawling and sitting up almost always begin from a prone position. Flat spots on the baby's head that develop from a supine sleep position are almost always temporary and will disappear soon after the baby begins to sit up.

Additional sleep recommendations include the following:

- Keep infants warm but don't allow them to become overheated. Keep the room temperature comfortable to you; avoid overdressing the baby. Experts think that the higher incidence of SIDS during winter months might be due to overheating or over bundling.
- Avoid soft, plush, or bulky bedding and toys in the baby's sleeping area. For example, waterbeds, rolls of bedding, cushions, fluffy comforters, pillows, sheepskins, and thick blankets should not be used for infants.
- Avoid using bumpers and pads that help stabilize the baby in a supine position.

Discussion questions

Use the following questions to test your knowledge of Sudden Infant Death Syndrome. Use the questions as part of a discussion group or for self-study.

1. What is Sudden Infant Death Syndrome?
2. What are some of the risk factors for SIDS?
3. What can you do to lower the risk of SIDS?
4. Why does the American Academy of Pediatrics recommend that all healthy infants be placed for sleep on their backs?
5. Describe the bed and bedclothes that are appropriate for infants.

Resources

American Academy of Pediatrics "Back to Sleep" campaign. Call 1-800-505-CRIB for more information on SIDS and sleep positions.

National Institute of Child Health and Human Development. Sudden Infant Death Syndrome. www.nichd.nih.gov/sids.htm.

SIDS Alliance
www.sidsalliance.org