SIDS

Sudden Infant Death Syndrome (SIDS) is 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" (Willinger et al., 1991).

Most deaths from SIDS occur by the end of the sixth month, usually between two and four months of age. A SIDS death occurs quickly and is often associated with sleep and no signs of suffering. More deaths are reported in the fall and winter. There is a 60-to-40 percent male-to-female ratio. A death is diagnosed as SIDS only after all other alternatives have been eliminated: SIDS is a diagnosis of exclusion.

Risk factors may be environmental or behavioral influences. Any risk factor may be a clue to finding the cause of a disease, but risk factors in and of themselves are not causes.

The mother's health and behavior during her pregnancy and the baby's health before birth seem to influence the occurrence of SIDS. Maternal risk factors include cigarette smoking during pregnancy, maternal age of less than 20 years; poor prenatal care; low weight gain, anemia; use of illegal drugs; and history of sexually transmitted disease or urinary tract infection. These factors suggest that SIDS is somehow associated with a harmful prenatal environment.

Because the death of an infant is a disruption of the natural order, it is traumatic for parents, family, and friends. The lack of a discernible cause, the suddenness of the tragedy, and the involvement of the legal system make a SIDS death especially difficult, leaving a great sense of loss and a need for understanding.

Most SIDS deaths occur between the ages of three weeks to four months. No one really knows why these babies die. The baby seems well, is put to bed, and later is found dead. SIDS deaths cannot be prevented or predicted. No one is to blame. Recently the American Academy of Pediatrics recommended that normal healthy babies be placed to sleep on their sides or backs to reduce the risk of SIDS. Some sleeping guidelines are listed below:

DO:

1. Make sure the crib is safe and in good repair. Slats should be no more than 2 3/8" apart. The mattress should be firm and fit the crib; the space between the mattress and crib side should not allow more than two finger widths.
2. Dress the baby in the type of clothing and cover with the amount of blankets you would find comfortable for sleeping.
3. Place the healthy young baby on its side or back to sleep. When babies are able to roll over, they can choose their own sleeping position.
4. Have the baby sleep alone.
5. Keep the room temperature about 70 degrees F.
6. Check your sleeping baby frequently while you are awake.
DO NOT:
1. DO NOT place the baby to sleep on a soft, loosely filled surface such as comforters, pillows, sheepskins, or cushions filled with polystyrene beads.
2. DO NOT let the baby sleep on a waterbed. Babies can become trapped and suffocate.
3. DO NOT use thin plastic wrapping materials such as cleaning bags or trash bags as mattress covers. Do not allow these things near the baby.
4. DO NOT allow cords from drapes or window blinds near the crib. Do not place any toys with strings or small parts or stringed items, such as a laundry bag, near the crib. These could strangle or choke the baby.
5. DO NOT leave the baby alone on a couch or on adult or youth beds.

For additional information, contact:
American SIDS Institute, 6065 Roswell Road, Suite 876, Atlanta, GA 30328, (800) 232-7437.

Association of SIDS Program Professionals (ASPP), c/o Massachusetts Center of SIDS, Boston City Hospital, 818 Harrison Avenue, Boston, MA 02118, (617) 534-7437.

National Sudden Infant Death Syndrome Resource Center (NSRC), 8201 Greensboro Drive, Suite 600, McLean, VA 22102-3810.

Southwest SIDS Research Institute, Inc., Brazosport Memorial Hospital, 100 Medical Drive, Lake Jackson, TX 77565, (409) 29902814.

Sudden Infant Death Syndrome Alliance, 10500 Little Patuxent Parkway, Suite 420, Columbia, MD 21044, (800) 221-7437.