

## **October SIDS Awareness Month**

Historically, the Massachusetts Center for Sudden Infant Death Syndrome/Massachusetts Infant and Child Death Bereavement Program has highlighted the sudden deaths of infants and young children during the month of October. Since the inception of the 1994 Back to Sleep Campaign, SIDS deaths have declined by 53 percent. While deaths of children to SIDS continues to decline, the sudden unexpected deaths of children to other causes of death remains significant. We must then continue to keep our educational and awareness efforts consistently strong throughout the year.

### **Definitions:**

**Sudden Infant Death Syndrome (SIDS)** is the diagnosis given for the sudden death of an infant under one year of age that remains unexplained after a thorough case investigation (autopsy, death scene investigation, review of infant's medical history. (Willinger, 1991) SIDS is a type of sudden unexplained infant death (SUID) Even when a thorough investigation is conducted, it may be difficult to separate SIDS from other SUID. (Centers for Disease Control, 2006)

**Sudden Unexplained Death in Childhood** is the sudden death of a child older than one year of age, which remains unexplained after a thorough case investigation, including review of the clinical history and circumstances of death and performance of a complete autopsy with appropriate ancillary testing. (Krous et al, 2005)

### **In the FIRST year of life**

--Approximately 4500 infants die suddenly and unexpectedly each year in US of no obvious cause. (Centers for Disease Control and Prevention, 2006)

--50% of these infants die of sudden infant death syndrome (SIDS)

--SIDS in the third leading cause of sudden death in the first year (8% of deaths in 2005; incidence rate is 0.5 deaths in 1000 live births.

--Other causes of sudden infant death include medical illness, birth defects, injury and undetermined causes

-- In 2007, the Center received 101 referrals. Sixty-six (66) of these infant deaths were sudden and unexpected. Many causes were identified, such as SIDS; Sudden Unexpected Infant Death; Sudden Unexpected or Unexplained Infant Death in the setting of bed sharing or compromised sleep environments; positional asphyxia, medical illness, accidents and undetermined causes of death. **Thirty-five (35) infant deaths were associated with unsafe sleep position or environment such as bed sharing in the adult bed or on a couch.**

The American Academy of Pediatrics revised recommendations to reduce the risk of infant death, published in 2005, included recommendations to help ensure a safe sleep environment. These recommendations listed below, included advice against babies sleeping in the same bed with parents or siblings.

### **RECOMMENDATIONS:**

- Always place your baby on his or her back to sleep, for naps and at night
- Place your baby on a firm sleep surface, such as on a safety-approved crib mattress, covered by a fitted sheet
- Keep soft objects, toys, and loose bedding out of your baby's sleep area
- Do not allow smoking around your baby
- Keep your baby's sleep area close to, but separate from where you and others sleep
- Do not let your baby overheat during sleep
- Avoid products that claim to reduce the risk of SIDS
- Do not use home monitors to reduce the risk of SIDS
- Provide "tummy time" when your baby is awake and someone is watching. Tummy time helps your baby's head, neck and shoulder muscles get stronger and helps to prevent flat spots on the head. Change the direction that your baby lies in the crib from one week to the next and avoid too much time in car seats, carriers and bouncers.
- Think about using a clean, dry pacifier when placing your infant down to sleep

In 2007 the Massachusetts Department of Public Health Injury Prevention and Control Program, in collaboration with the Massachusetts SIDS Center, published a fact sheet for parents and caregivers entitled *Give Your Baby the Gift of Safe Sleep*. The fact sheet includes the following recommendations to reduce the deaths of infants in compromised sleep environments.

- Put your baby to sleep on his/her back ALL the time—at night and for naps.
- New parents often want to be close to their babies at night, but sharing a bed may put your baby at risk for suffocation. Let your baby sleep in his/her own crib but keep the crib close enough to know when your baby needs you. If you are breastfeeding, sleeping near your baby's crib makes it easy for you to feed your baby when hungry and helps you build a good milk supply.
- Your baby's crib should have a firm mattress. Fluffy pillows, quilts and toys are not safe for sleep, but can use a blanket if you tuck it in snugly under the crib mattress, no higher than your baby's chest. You can also just dress your baby in warm pajamas and put your baby to sleep without a blanket.
- Before you put your baby to sleep in a used crib, check to be sure the crib meets safety standards. To find out, call the Consumer Product Safety Commission toll free at: 1-800-638-2772.
- Don't let your baby sleep on the couch or in an armchair—your baby could get stuck in the cracks and suffocate.

- Your baby should not sleep or nap in the same bed with sisters, brothers, babysitters or anyone else. Another person, no matter how small, could roll over and smother the baby.
- Be sure to give your baby plenty of time on their tummy when your baby is awake and an adult is watching. This will help your baby's neck and shoulder muscles get stronger.

Go to the SIDS Center's website to download the fact sheet **Give Your Baby the Gift of Safe Sleep** : [www.bmc.org/pediatrics/special/SIDS/PublicEducation](http://www.bmc.org/pediatrics/special/SIDS/PublicEducation) or call the SIDS Center at 1-800-641-7437 for multiple copies in English/Spanish/Portuguese/Haitian Creole/Cambodian/Vietnamese/Chinese

### **Children age 1-4 years**

--Approximately 200 children die suddenly and unexpectedly with no obvious cause each year in the US. The incidence rate is 1/100,000 children

--Other causes of death include injury, cancer, and other medical illness

--Ten sudden deaths of children were reported to the Massachusetts SID Center in 2007, ages 1-4 years.

Research into Sudden Unexpected Death in Childhood is in its early stages. Risk reduction measures as listed above continue to apply, depending on your child's age and growth and development. In addition:

- Follow optimal pediatric care recommendations
- Keep well child appointments
- Maintain immunizations
- Bring your child for health care as you see necessary

Recent awareness activities, which have brought attention to SIDS and Sudden Unexpected Infant and Child Death in Massachusetts, include:

- The 2008 Massachusetts Legislature enacted the Paige Victoria Perry Act, An Act Relative to Sudden Unexplained Child Deaths.
- The Act was approved by Governor Deval Patrick. Representative Perry, Mary McClain from the SIDS Center and Howard and Pam Teibel and sons Max and Philip attended a ceremonial signing with the Governor on September 17, 2008.. The Teibels' son Andrew died of sudden infant death syndrome (SIDS) and their testimony before the Judiciary Committee helped ensure the enactment of this legislation. Parents also provided written testimony to support the passage of this legislation.

- The Cape Cod Times reported on Representative Jeffrey Perry's successful sponsorship of the Paige Victoria Perry Act and provided information on SIDS,
- The SIDS Race For Life was held in Springfield, MA on October 5, 2008. This Race is sponsored by Congressman Richard Neal in memory of Barry Metayer, Jr. son of Anne and Barry Metayer. Newspaper and TV coverage not only included coverage of the Race but information about SIDS and the grief of families.