

## SIDS risk factors

- Prematurity.
- Low birth weight.
- Maternal smoking and/or substance abuse.
- Exposure to secondhand smoke.
- Little or no prenatal care.
- Young maternal age.
- Stomach sleeping.

50% of infants who die of SIDS do not have or are not exposed to any risk factors.

**SIDS cases have declined 40% since the back to sleep recommendation.**

### What parents can do to reduce the risk

- Pregnant women need early and regular prenatal care.
- Avoid smoking and exposure to secondhand smoke.
- Avoid alcohol and other nonprescription drugs.
- Bring infants in for regular well-baby checks.
- Sleep healthy babies on their backs.
- Keep baby's room temperature at a comfortable level.
- Have baby sleep on a firm sleep surface.
- Parents should avoid stuffed animals, fluffy comforters and pillows in their infant's sleep area.
- Offer a pacifier to infants one month after birth.

**For more information and resources, visit the Infant Death Center Web page at:**  
[www.chawisconsin.org/idc/](http://www.chawisconsin.org/idc/)



The Infant Death Center is a statewide initiative of Children's Health Alliance of Wisconsin. The Center provides bereavement information and support to Wisconsin families and others affected by the sudden and unexpected death of an infant.

For more information and resources, visit [www.chawisconsin.org](http://www.chawisconsin.org) or call:

**6737 W. Washington St., Ste. 1111  
West Allis, WI 53214  
(414) 337-4571**

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# SUDDEN INFANT DEATH SYNDROME (SIDS)

## FACTS



[www.chawisconsin.org](http://www.chawisconsin.org)

## SIDS defined

SIDS is the sudden death of an infant less than 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.

### 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.

Cases failing to meet the standards of this definition, including those without autopsy should not be diagnosed as SIDS. (National Institute of Child Health and Human Development, 1989.)

### Why is an autopsy critical?

Sudden and unexplained infant deaths can mimic SIDS. In any 100 infants who die suddenly and unexpectedly, about 20% will be explained by a complete autopsy (including microscopic examination). For example, 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.

Most of the remaining 80% that cannot be explained are diagnosed as SIDS Category I (classic SIDS features present). Deaths with circumstances not determined with certainty are diagnosed as SIDS Category II (probable SIDS).

## 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% between midnight and noon. Infants do not cry and there is no struggle.

### Time of year

SIDS statistics have shown higher rates during winter months, which may be due to increased upper respiratory infections.

### Gender

Male infants are slightly more susceptible to SIDS than females.

### 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 otherwise healthy babies in the United States between the ages of one month and one year of age.
- SIDS occurs at a rate of about 0.5/1000 live births.
- Approximately 2000 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.

## Common myths

### Immunizations and SIDS

The data clearly shows there is no causal relationship between SIDS and childhood immunizations.

### Breastfeeding vs. bottle feeding

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

### 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.

### Suffocation

Accidental suffocation can occur by entrapment of the head or body in a crib, or by covering of the nose and mouth. Deaths due to suffocation are not SIDS.

### Is SIDS likely to repeat in families?

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