



What is SIDS?

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What is SIDS?

SIDS stands for "sudden infant death syndrome" and it's the leading cause of death in the U.S. for babies between 1 month and 1 year old. SIDS isn't easy to grasp because it's not any one illness or disease. Rather, it's the diagnosis used when a child under a year old dies suddenly and an exact cause can't be pinpointed after a complete medical and legal investigation, including an autopsy. That it can happen without warning makes it a shocking and sad experience for families.

Approximately 2,500 infants die of SIDS in the U.S. each year.

SIDS most commonly strikes between the ages of 2 and 4 months, with 90 percent of cases in infants under 6 months. It's also known as "crib death" because it happens most often during sleep, usually between the hours of 10 p.m. and 10 a.m. and during cold-weather months.

Nighttime isn't the only time that SIDS strikes, however. If your infant is in daycare, it's important to note that — according to a study published in 2000 in the journal *Pediatrics* 20% of SIDS deaths happen in childcare settings. This is a surprisingly high number, considering that babies spend much less time sleeping at daycare than at home. So it's crucial to make sure your daycare provider puts babies on their back for naps and follows safe sleeping guidelines (see "How can I reduce my baby's risk of SIDS," below).

What causes SIDS?

No one knows for sure. Researchers have learned a great deal about SIDS in the past three decades but they still have no definitive answer to that question. Many experts believe that SIDS happens when a baby with an underlying abnormality (for example, a brain defect that affects breathing) sleeps tummy down or is faced with an environmental condition such as secondhand smoke during a critical period of growth. Experts are continuing to study the brain, the autonomic nervous system, infant care and sleep environments, infection and immunity, and genetics in search of answers.

Which babies are most at risk?

Although no one knows for sure what causes SIDS, some risk factors have been identified. They include:

Having a parent or caregiver who smokes.

Studies show that a baby's risk of SIDS rises with each additional smoker in the household, with the number of cigarettes smoked a day, and with the length of exposure to cigarette smoke.

Tummy sleeping

Research shows that a baby's risk of SIDS is 1.7 to 12.9 percent higher (depending on the study) if he sleeps on his tummy instead of his back. According to Betty McEntire, the executive director of the American SIDS Institute, when a baby sleeps tummy down he's more likely to overheat, have pauses in breathing, and re-breathe the air he has just

breathed, which can raise his level of carbon dioxide. In addition, several studies have shown that if a baby is used to sleeping on his back and is placed to sleep on his tummy, his risk of SIDS markedly increases. (Some experts believe this accounts for the unexpectedly high rate of SIDS in daycare settings.)

Premature or very low birth weight

The earlier a baby is born, the higher his risk of SIDS. Likewise, the lower his birth weight, the higher the risk.

Overheating while sleeping

There's strong evidence that becoming overheated can substantially raise a baby's risk of SIDS. Overheating can result from being in an overheated room, wrapping or covering a baby in too many blankets, putting a blanket over a baby's head, or running a fever, according to Warren Guntheroth, SIDS expert and a professor of pediatrics at the University of Washington in Seattle.

Sleeping on a soft surface

Several studies link soft sleeping surfaces to an increased risk of SIDS. Waterbeds, beanbags, sofas, quilts, comforters, and other soft surfaces are all unsafe for a baby to sleep on. Like tummy-down sleep positions, soft surfaces increase the chance that he'll encounter problems with breathing and/or overheating.

A mother who smoked or abused drugs during pregnancy

Almost every study of risk factors for SIDS has underlined maternal smoking during pregnancy as a risk factor. Of course, both smoking and drug use can compromise a baby's healthy development during pregnancy.

A mother under the age of 20 at the time of her pregnancy

The risk of SIDS also increases with each baby born to a teen mother. Also, the shorter the interval between your pregnancies, the higher the risk of SIDS for your baby.

Certain ethnicities:

African-American infants are two-and-a-half times more likely to die of SIDS than white infants, and Native American babies have three times the risk. Some researchers hypothesize that a cultural preference for putting babies to sleep on their stomachs puts certain groups at higher risk. Asian families, who have a cultural preference for placing infants on their

backs, had a lower-than-average risk for SIDS until after immigration to North America, when they changed to placing babies on their tummies and their SIDS rates rose.

Gender

Boys of all ethnicities are at slightly higher risk than girls by a ratio of 1.5 to 1.

How can I reduce my baby's risk of SIDS?

There's no guaranteed way to prevent SIDS, but you can do a number of things to greatly decrease your baby's risk:

Put your baby to sleep on his back.

This is the single most important thing you can do to help protect your baby. The rate of deaths from SIDS has dropped 40 percent since 1994, when the "Back to Sleep" campaign was launched by the American Academy of Pediatrics, the U.S. Public Health Service, the SIDS Alliance, and the Association of SIDS and Infant Mortality Programs. Make sure that others; relatives and caregivers, for example — know not to place your baby on his tummy to sleep.

Most people don't know that side sleeping isn't safe, either. In fact, if your baby sleeps on his side rather than his back, his chances of getting SIDS are doubled. That's because if you place your baby on his side he can easily end up on his tummy. Of course, by the time he's 5 or 6 months old, your baby will be able to roll over in both directions, making it a challenge for you to keep him on his back at night. At this age his risk for SIDS will start to drop, though, so just do your best to get him settled on his back, and then don't worry if he rolls over.

Keep in mind that putting your baby on his back all the time can cause him to develop a flat spot on the back or side of his head, called plagiocephaly or flat head syndrome. You can prevent it by learning how to position your baby when you lay him down. (If you have any questions about your baby's sleep position, talk to your doctor or nurse.) Also don't let your baby spend too much time in a car seat or bouncy chair, because these can also contribute to plagiocephaly. And be sure to give him plenty of time on his tummy when he's awake, to help him develop his muscles properly.

Take care of yourself and your unborn baby while you're pregnant. To ensure your baby's health and reduce the risk of a premature

birth or low birth weight (which are risk factors for SIDS), get proper prenatal care and nutrition. And you definitely won't want to smoke cigarettes or use illegal drugs during your pregnancy.

Don't allow smoking around your baby.

Keep the air around your baby — at home, in the car, and in other environments — smoke-free. If you feel you can't quit, go outside the house to smoke and make sure others do the same.

Choose bedding carefully.

Put your baby to sleep on a firm, flat mattress with no pillow and nothing but a fitted sheet under him. Don't put stuffed toys or other soft materials in his crib, either. If you can't resist covering him, use a thin blanket, and tuck it around the mattress, only as far up as his chest. If you think your baby is chilly, simply dress him in warmer clothing such as footed pajamas or in a onesie under a "wearable blanket" (a sleeveless garment that's closed along the bottom like a bag).

Avoid overheating your baby.

To keep your baby from getting too warm while he sleeps, don't overbundle him, and don't cover his head with a blanket. The room he sleeps in shouldn't be too toasty, either; it should be comfortable for a lightly clothed adult. Signs that your baby may be overheated include sweating, damp hair, heat rash, rapid breathing, restlessness, and fever.

Try to reduce exposure to infection.

SIDS sometimes occurs in tandem with respiratory and gastro intestinal infections. So it's fine to ask people to wash their hands before holding your baby. And of course, whenever possible, avoid exposing your baby to sick people.

Does breastfeeding reduce the risk of SIDS?

There's no conclusive evidence that breastfeeding itself will reduce your baby's risk of SIDS. Breastfeeding will help reduce the rate of respiratory and gastrointestinal infections, though, which (as mentioned above) often occur along with SIDS.

Can sharing a bed with my baby help reduce the risk of SIDS?

Not everyone agrees, but there are compelling reasons why you might not want take your baby to bed with you during your baby's first months. For one thing, your bed surely has pillows and blankets and other soft bedding, all of which are risk factors for SIDS. It's also easy for your baby to overheat while sharing your bed, and the risk of rolling

over onto your baby (particularly for an obese parent) is very real. "All the studies that have been conducted on this subject have shown that bedsharing increases the risk of SIDS," says John Kattwinkel, chairman of the AAP Task Force on Infant Sleep Position and Sudden Infant Death Syndrome.

On the other hand, some experts believe that co-sleeping might allow a mother to respond more quickly to changes in her baby's breathing and movements. And many parents are comfortable with and committed to bed-sharing.

If you do decide to share a bed with your baby, James McKenna, head of the Mother-Baby Behavioral Sleep Laboratory at the University of Notre Dame, advises that you make sure that your mattress fits tightly against the headboard and has no space around it where your baby's head could get stuck. He also suggests that you keep heavy, fluffy bedding away from your baby, and eliminate any cords or plastic bags in the area of the bed. And even in your bed, put your baby to sleep on his back, on the flat mattress.

There are instances when you absolutely should not sleep with your baby. If you're a smoker, or are on medication that affects your sleep, or if you've been drinking, it's unsafe for your baby to sleep in your bed. Never bring your baby to sleep in a waterbed. And if you're very over weight, you shouldn't sleep with a baby under 3 months old.

British researchers found that when a baby is in his own bed in his parent's room his risk of SIDS is lower. So an alternative to taking your baby to bed with you is to keep him in a crib or bassinet in your room, or invest in a bedside bassinet (these are open on one side and hook onto the adult bed, at the same height). That way your baby is accessible, but in his own bed.

Is it okay for me to swaddle my infant?

Some researchers suggest that swaddling — a method of wrapping a baby securely in a blanket or cloth — may help in the prevention of SIDS because it can help babies sleep more comfortably on their back. (If your baby startles while asleep, his own body movements can cause him to wake up; swaddling can limit those movements and help him feel secure.) Other SIDS experts caution, though, that swaddling can contribute to overheating. So if you do swaddle your baby, use a thin blanket and make sure the room isn't too warm. And of course, never put your baby on his tummy when he's swaddled.

Will using a pacifier reduce my baby's chances of SIDS?

Recent studies show a lower incidence of SIDS among infants who use pacifiers, perhaps because a baby with a pacifier is unlikely to be placed on his tummy. Pacifiers have also been linked to an increase in ear infections, a shortening of breastfeeding time, and dental problems, though, so the AAP is waiting for further studies before it makes a recommendation about pacifiers as a preventive measure for SIDS.

Can products—such as sleep monitors, special crib mattresses, or wearable blankets—help?

There are two types of sleeping monitors. One is a medical, cardio respiratory monitor that may be prescribed by your baby's pediatrician if your baby has had a life-threatening breathing incident or has other SIDS risk factors. If she has prescribed such a monitor for your baby, of course you should use it diligently. There's no evidence that home monitoring systems decrease the incidence of SIDS, but if buying one of these for your healthy baby helps you sleep at night then by all means do it.

As for a special crib mattress, some companies are now marketing mattresses with a built-in ventilation system that they claim prevents the buildup of carbon dioxide. These mattresses may keep more fresh air circulating around your baby, but there's no evidence that they reduce the risk of SIDS, and they may also give you a false sense of security. If you opt to buy one, you should still follow the risk reduction tips above.

If you don't like the idea of leaving your baby uncovered, you may want to try a wearable blanket (a sleeveless garment that's closed along the bottom like a bag). It keeps your baby warm while eliminating the possibility that the covers will slip over his head. One such product is the SleepSack, which is endorsed by the First Candle/SIDS Alliance.

Where can I get more information on SIDS?

- The American SIDS Institute conducts SIDS research and offers clinical services, education, and support to pediatricians and families round the clock. Call the institute at (800) 232-7437, or visit its Web site at <http://www.sids.org>
- The Back to Sleep Hotline offers information, support, and referrals. Call (800) 505-2742.
- The CJFoundation for SIDS is the largest nongovernment funder of

SIDS-related programs in the United States. Visit the foundation's Web site for news about SIDS, a look at ongoing research, and updates on fundraisers and events around the country. <http://www.cfsids.com>

- The National SIDS/Infant Death Resource Center provides information sheets, annotated bibliographies, and referral services to parents, caregivers, and researchers. <http://www.sidscenter.org>
- The First Candle/SIDS Alliance provides SIDS education and research as well as support for families whose babies have died of SIDS. <http://www.firstcandle.org>

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