saskatchewan preventioninstitute

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Sudden Infant Death Syndrome (SIDS)

SIDS is the leading cause of death in infants between one month and one year of age in the developed world. In 1999, there were 166 infant deaths attributed to SIDS (Statistics Canada). The risk to aboriginal infants is three to four times higher than the risk to non-aboriginal infants. From 1989 to 1999, 197 infants died of SIDS in Saskatchewan (Saskatchewan Health).

What is Sudden Infant Death Syndrome? (SIDS)

Sudden Infant Death Syndrome, commonly referred to as SIDS, refers to the sudden and unexpected death of an apparently healthy infant less than one year of age. The death remains unexplained even after a full postmortem investigation.

What Causes SIDS?

No one knows why a baby who seems healthy can die so suddenly, without any apparent cause. Although the specific cause of SIDS remains unknown, research has been able to identify certain common elements or "risk factors" for SIDS.

Reducing the Risk

Put Babies to Sleep on their Backs

Babies who usually sleep on their stomachs (prone position) or side have an increased risk of SIDS compared to babies who sleep on their backs. Studies conducted in a number of countries have shown that when there is an increase in the number of babies sleeping on their backs, there is a decrease in SIDS deaths.

The sleeping environment is also important to consider. The risk of SIDS is higher if a baby's head becomes covered during sleep. Soft mattresses, fluffy or plush toys, bumper pads and soft bedding, such as comforters and pillows, are not recommended for the baby's sleeping environment. Healthy babies should be put to sleep on their backs on a firm flat surface and covered with sheets and light blankets pulled up no higher than the collarbone area.

Because sleeping positions become habitual, it is important to put babies on their backs for sleep right from birth. Parents do not need to fear that healthy babies will choke while sleeping on their backs. The anatomy of the upper respiratory airway is such that any regurgitated milk will be easily swallowed and aspiration into the respiratory tract will be avoided.

Some babies may be born with conditions that require that they be placed on their stomachs or sides for sleeping. Physicians will prescribe the sleeping positions for those infants who may be compromised by being placed on their backs for sleep.

It is important that babies be placed on their stomachs while they are awake and being supervised so that they can develop their back and neck muscles. The time spent on the stomach should increase in length as the babies learn to raise their heads and as they get stronger.

Positional plagiocephaly, commonly referred to as "flat head," is a concern of some parents. If a baby sleeps in one position, with his head always turned in one direction, positional plagiocephaly can occur because the skull is soft and the bones can be affected by pressure. Severe flattening can become permanent and while this does not affect brain function or development, parents wish to avoid this outcome. In order to avoid positional plagiocephaly, babies' heads should be placed in different positions for sleep. Alternate the sleep position in the crib by positioning the baby with his head at the head of the crib one day and at the foot of the crib the next day. Babies like to look out into the room and if their positions are changed, the risk of positional plagiocephaly will be reduced. It is equally important to provide the babies with time on their stomachs when they are awake. Once babies are older and can turn over on their own, they will find their own comfortable sleeping position.

Provide a Smoke and Drug-Free Environment for the Baby

In Saskatchewan, parents and children are exposed to tobacco smoke at higher rates than in other parts of Canada. Reports from the Canadian Tobacco Monitoring Survey indicate that in 2001, 25 per cent of Saskatchewan people aged 15 and over were current smokers, compared with 22 per cent of Canadians in this age group. Regular smoking occurred in 26 per cent of homes in Saskatchewan with children under the age of 12, compared with 21 per cent in Canada.

Babies exposed to tobacco smoke before and/or after birth are at an increased risk of SIDS compared to those babies who have not been exposed.

Some studies have suggested that using certain drugs during pregnancy, such as marijuana, crack, cocaine and heroin, as well as binge drinking, may increase the risk of SIDS. Use of these substances should be avoided during pregnancy as well as while breastfeeding.

Don't let Babies get Overheated

Babies who become too hot are at an increased risk of SIDS. While babies need protection from the Canadian elements, they should not become too hot. Parents should watch for signs of scalp and facial sweating and should remember that their babies do not need to be dressed more warmly than adults do in order to be comfortable. It is important to remove snowsuits when babies are brought indoors, even though the babies may be sleeping.

Breastfeed Babies

Breastfeeding has significant nutritional, immunological and psychological benefits for the health of babies and women should be encouraged to breastfeed. Breastfeeding may help protect against SIDS but does not provide a guarantee as SIDS occurs in both breast and bottle-fed babies.

Recommendations

A Joint Statement, published by the Canadian Foundation for the Study of Infant Deaths, the Canadian Institute of Child Health, the Canadian Paediatric Society, and Health Canada, has made four recommendations that may reduce the risk of SIDS:

- Normal, healthy infants should be placed on their backs for sleep.
- Infants should be provided with a smoke and drug-free environment.
- Infants should not be allowed to become too hot.
- Women should be encouraged to breastfeed their babies.

The importance of sleeping position, tobacco and drug exposure, temperature, and breastfeeding should be stressed to all parents, particularly those of high risk. However, it is important to note that the above recommendations could reduce the risk of SIDS, but will not prevent all SIDS deaths. The causes of SIDS remain unknown. Parents who have had a child die of SIDS should not conclude that their child care practices caused their baby's death.

Information for this fact sheet was adapted from:

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