Sudden Unexpected Infant Deaths: What Are We Learning and How Can We Reduce the Risks

Larry Consenstein, MD

It wasn’t that many years ago, certainly when my kids were babies, that our greatest fear as parents in their first months was the unknown, unseen killer—sudden infant death syndrome (SIDS). Much has changed since the “Back to Sleep” campaign started in 1994. Now, new parents know what to do to keep their baby safe—their newborns should always sleep on their back, in a crib without comforters or stuffed animals, near their mother but in a separate bed, and should be breast-fed. Unfortunately, as with many public health efforts, some people are not aware of safety precautions and may be at risk of suffering a tragedy as a result. Sudden infant death remains the most common cause for death in the first 12 months of life, outside of the immediate newborn period.

As our understanding of the pathophysiology of sudden death in infancy has grown, fewer deaths are considered to have an unknown etiology. Drs. Christine G. McIntosh and Edwin A. Mitchell in their article, “The Evolving Understanding of Sudden Unexpected Infant Death,” discuss the evolution of SIDS to sudden unexpected infant death (SUID). “Back to Sleep” education has resulted in a significant decrease in deaths; however, we are now experiencing a plateau. In the article “Beyond ‘Back to Sleep’: Ways to Further Reduce the Risk of Sudden Infant Death Syndrome,” Dr. Fern R. Hauck and Kawai O. Tanabe review several conditions that increase the risk of SUID and some of the interventions that have been employed to reduce these risks. Drs. Sunah S. Hwang and Michael J. Corwin in the article “Safe Infant Sleep Practices: Parental Engagement, Education, and Behavior Change” dive into the evidence for innovative educational programs that can more effectively engage parents in risk reduction behaviors.

The death of an infant is an especially tragic event. Every unexpected death is accompanied by profound guilt and sadness. An effective investigation of the child’s demise has become an important step in the process of resolving grief. In the article “Medicolegal Death Investigation of Sudden Unexpected Infant Deaths,” Dr. Roger A. Mitchell, Jr., Dr. Constance DiAngelo, and Daniel Morgan help to guide the process of infant death investigation. Finally, for years the only option for families felt to be at increased risk for SIDS was the use of home cardiorespiratory monitors. Although they have not been proven to be effective in SIDS prevention, they may serve other functions and teach providers more about at-risk infants. In the article “The History of Home Cardiorespiratory Monitoring,” Dr. Gary E. Freed and Francis Martinez describe the history of home monitoring as well as their experience monitoring over 35,000 babies.

We hope this issue will be a valuable resource for all providers who care for babies, helping parents to make good choices, and teaching them to love their babies safely.

REFERENCE


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About the Guest Editor

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