“Back To Sleep”
How You Can Help Reduce SIDS Risk
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Statistics

- SIDS is the 3rd leading cause of infant mortality in the US, behind prematurity and congenital anomalies
  - Leading cause of death in infants after 1 month of age
  - Most occur between 2-4 months of age
- Sleeping in prone position puts the infant at a 13 times greater risk for SIDS
- African Americans and American Indians have a 3 times greater incidence of SIDS
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SIDS IS

- A sudden death of a baby that cannot be explained after:
  - Autopsy
  - Examination of death scene
  - Review of medical history
- A diagnosis by exclusion
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SIDS is NOT

- Caused by external suffocation
- Caused by vomiting and choking
- Caused by immunizations
- Child abuse
- Contagious
- Hereditary
- Predictable or completely preventable
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Factors That May Increase the Incidence of SIDS

- Smoke exposure in the home may predispose the infant to respiratory difficulties
- Overheating
- Respiratory illness
- Sleeping on a soft surface
- Bed-sharing
- Soft bedding or stuffed animals in bed
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What You Should Know About These Risk Factors

- Risk factors don’t CAUSE SIDS, but may happen more often in babies that die of SIDS
- Even babies who have no risk factors can die of SIDS
- SIDS cannot be completely prevented
- SIDS is nobody’s fault
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Back Sleeping

• The pathophysiology isn’t known, however, we know that the rate of SIDS has dropped by 50% since the “Back to Sleep” campaign
• May be due to:
  • Maintaining a patent airway
  • Limit re-breathing of CO₂
• Side sleeping is better than stomach sleeping, but still TWICE the risk of back
Bed Sharing

- From the National Infant Sleep Position Study (NISPS)
  - Infants who bed shared were 2.9 times more likely to sleep between 2 bedcovers
  - 1.75 times more likely to be covered with a quilt
  - Adult beds are not designed for babies
    - Comforters, pillows, soft mattresses increase the risk of suffocation
    - Baby could become trapped between the headboard, wall or under an adult body
  - For breast-feeding mothers, “Share Your Room, Not Your Bed”
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Nursing Considerations:
In the Hospital

- No comforters, quilts, sheepskins, blankets, pillows or wedges under or around the baby
- Avoid over-wrapping
- Feet-to-Foot
- Need to address SIDS prevention
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Nursing Considerations:
Discharge Teaching

- Always “Back to Sleep”
- Smoke-free environment
- Use sleep clothing or *wearable* blankets rather than blankets
- Firm mattress with tightly fitted sheets
- Avoid over-heating with clothing (no hats), blankets and environmental heating (room 70-72 degrees)
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Nursing Considerations:
Discharge Teaching

- Avoid wedges and positioning devices
- Keep crib free of stuffed animals, toys, and soft objects
- Face and head to stay uncovered during sleep
- Feet to Foot
- “Share your Room, Not your Bed”
- Tell others about your plan (grandparents, caregivers, babysitters)
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Common Concerns Related to Supine Position

- No increase in deaths related to aspiration pneumonia or GERD
- Head flattening is reduced with regular *supervised* “tummy time” while awake
- Attainment of gross motor developmental milestones may occur slightly later, but no longer detectable by 18 months of age

*Source: American Academy of Pediatrics (AAP)*
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You CAN Make a Difference!
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For more information-

- First Candle/SIDS Alliance:
  - www.firstcandle.org ; 800-221-SIDS
- Back to Sleep
  - www.nichd.nih.gov ; 800-505-CRIB
- March of Dimes
  - www.marchofdimes.com
- Halo Innovations
  - www.halosleep.com ; 888-999-HALO (4256)
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Safe Sleep for Your Baby
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