

Premature infants at greater risk of SIDS

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Premature infants are at a higher risk of SIDS and other sleep-related deaths than full term babies. Credit: Rutgers University

Premature infants still have a greater risk compared to full-term babies of dying of SIDS and other sleep-related infant deaths despite recommendations from the American Academy of Pediatrics that hospital NICU's provide more safe infant sleep education to parents before they go home.

"While we can't undo a preterm birth, we can help compensate for the accompanying elevated risk of sudden infant [death](#) syndrome and other sleep-related infant deaths by helping families adopt the beneficial practices that include putting an infant on his back to sleep and keeping the sleep environment clutter free," said Barbara Ostfeld, professor of pediatrics at Rutgers Robert Wood Johnson Medical School and program director of the SIDS Center of New Jersey.

Ostfeld and co-author Thomas Hegyi, professor of pediatrics at Robert Wood Johnson and medical director of the SIDS Center of New Jersey, published a study this month in *Pediatrics* which found that infants born between 24 to 27 weeks had a more than three times higher chance than

babies born full term of dying before their first birthday of a sudden unexpected infant death, which is comprised of SIDS and other sleep-related infant deaths.

The risk was high, according to researchers, even when factors, including smoking and inadequate prenatal care, were taken out of the equation. While the level of risk decreased for [premature infants](#) born closer to full-term, they were still significantly higher, according to the study.

In their research, Ostfeld and her colleagues analyzed United States infant birth and death certificates between 2012 and 2013 and found the risk of dying from SIDS and other sleep-related causes in the first year was highest for those born between 24 and 27 weeks. While 0.51 deaths were reported for every 1,000 births between 39 to 42 weeks, there were 2.68 deaths for every 1,000 births between 24 and 27 weeks.

Every year in the United States about 3,500 infants die of a sleep-related death, a significant decrease from 25 years ago when the American Academy of Pediatrics released its landmark guidelines that all babies should be placed on their back to sleep.

New recommendations were released again in 2011 and 2016 to address SIDS other sleep-related deaths – 25 percent of which are caused from suffocation, entrapment and asphyxia—which have increased. The AAP also recommended keeping [infants](#) in a consumer product safety commission approved crib, bassinet or portable crib near the parent's bed.

"It's important that neonatal intensive care units assess how well they are complying with these guidelines and teaching about safe infant sleep practices," said Ostfeld. "Pediatricians need to remind parents and grandparents at every office visit."

Ostfeld said researchers need to develop more evidence-based interventions for increasing

compliance with safe sleep practices, and also need to address potentially treatable intrinsic factors that elevate risk for the preterm infant. Besides unsafe sleep practices, other causes for infant mortality include smoking, poor prenatal care and poverty, she said.

Based on the most recently available national data, New Jersey has the lowest rate of sudden unexpected infant deaths in the nation. "The extensive statewide education programs conducted by the SIDS Center of New Jersey in collaboration with its many partners have contributed to these improvements," Ostfeld said.

To reinforce the impact of advice given in the NICU, Ostfeld and Hegyi, a neonatologist, will be meeting with New Jersey's network of neonatal providers to discuss the research findings and to re-enforce the long-standing recommendations of the AAP.

"Prematurity is a challenge," Hegyi said. "What we need to do is make sure parents and families understand what they can do when they leave the hospital to keep their baby safe."

More information: Barbara M. Ostfeld et al. Prematurity and Sudden Unexpected Infant Deaths in the United States, *Pediatrics* (2017). DOI: [10.1542/peds.2016-3334](https://doi.org/10.1542/peds.2016-3334)

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