

# Infant Safe Sleep Fact Sheet Alabama, 2011-2013



## Facts about Sleep-Related Infant Deaths in Alabama:

In 2013, there were 107 sleep-related deaths among infants in Alabama. Sleep-related infant deaths account for 21.4% of the total infant mortality in Alabama. The percentages of sleep-related infant deaths were higher among full-term, normal birth weight infants than infants with lower birth weights and gestational ages.

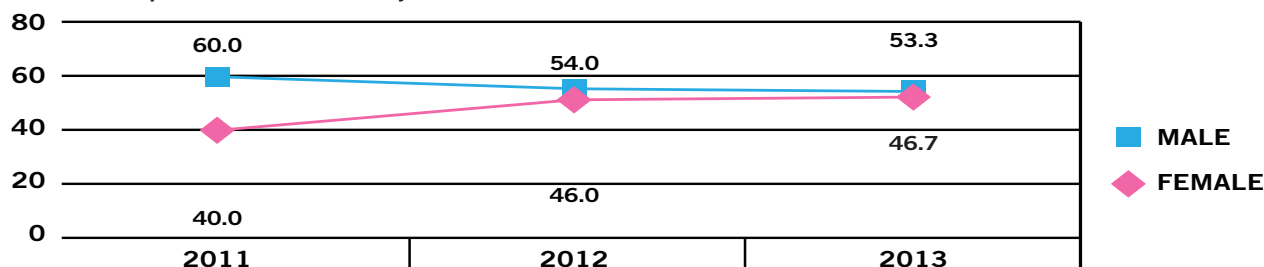


## Safe Sleep Recommendations from the American Academy of Pediatrics<sup>1</sup>:

- Place infants on their backs to sleep
- Use a firm sleep surface
- Room-sharing without bed-sharing is recommended
- Keep soft objects and loose bedding out of the crib
- Avoid smoke exposure during pregnancy and after birth
- Breastfeeding is recommended because it reduces the risk of sudden infant death syndrome (SIDS) and sudden unexpected infant death (SUID)
- Consider offering a pacifier at nap time and bedtime
- Avoid overheating

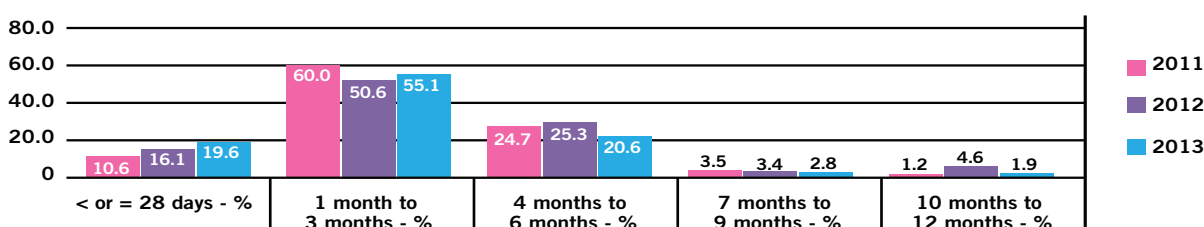
## Infant Characteristics:

Percent of Sleep-Related Infant Deaths by Sex



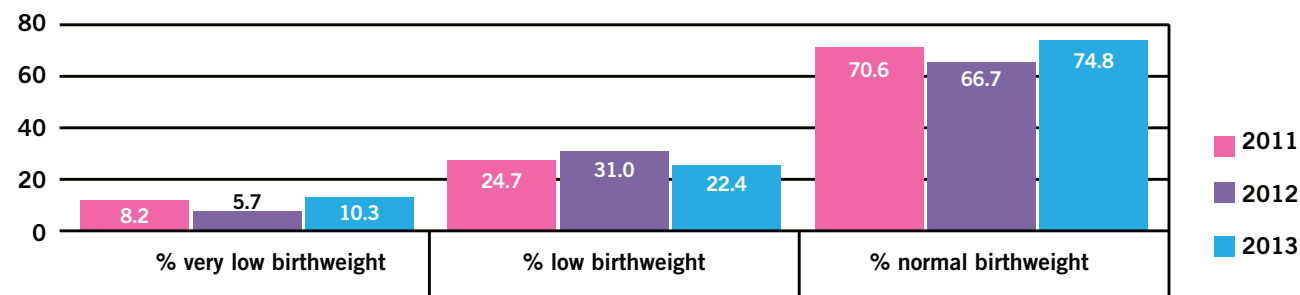
The percent of sleep-related infant deaths was slightly higher in male infants than female infants.

Percent of Sleep-related Infant Deaths by Infant Age



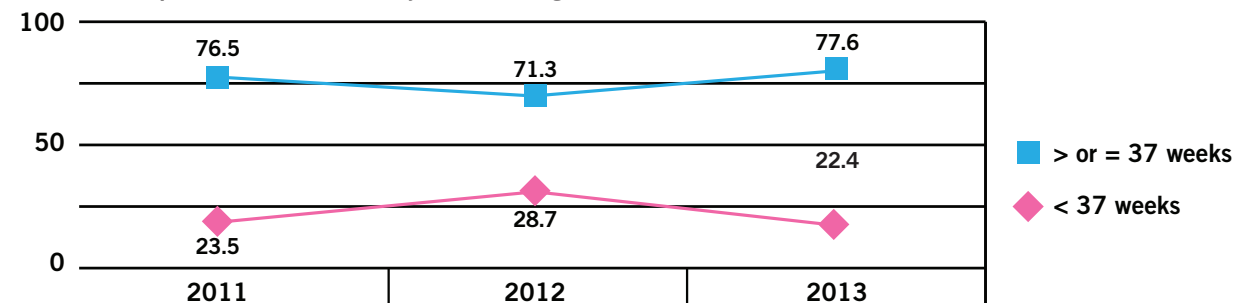
Infant sleep-related deaths are highest in the one month to three months age group. Risk factors are different for younger infants (0-3 months) versus older infants (4 months to 364 days). For younger infants, bed sharing is the principal risk factor. Whereas, for older infants, rolling into objects in the sleep area, which can lead to obstruction in breathing, is the main risk factor.<sup>3</sup>

**Percent of Sleep-Related Infant Deaths by Birth Weight**



From 2011 to 2013, infants that were born with a normal birth weight had higher percentages of sleep-related deaths than those with very low birth weight. Although mortality rates are highest in babies with very low birth weights, these babies are mostly dying of causes other than unsafe sleep. The leading causes of death in these infants are disorders of the newborn related to short gestation and low birth weight.

**Percent of Sleep-Related Infant Deaths by Gestational Age**



From 2011 to 2013, infants with a gestational age greater than 37 weeks had higher percentages of sleep-related deaths than infants who were born prematurely. Although mortality rates are higher in premature babies, these babies are mostly dying of causes other than unsafe sleep. These causes include disorders of newborns related to short gestation and low birth weight, congenital malformations, deformations and chromosomal abnormalities, and other causes. Another reason the percent of sleep-related deaths in premature babies is lower may be due to closer monitoring of premature infants and more emphasis by health care providers in communicating the safe sleep message to parents of premature babies<sup>4</sup>

## Discussion:

Parents are more likely to place infants on their backs immediately following hospital discharge. However, parents tend to switch to the side or prone position when infants reach two to three months of age, which is the peak age for SIDS.<sup>2</sup> Health care professionals must emphasize the importance of continuing safe-sleep practices throughout infancy.

Health care professionals need to provide more education to parents regarding the risks of using soft pillows, loose blankets, and bumper pads in the infant sleep area.<sup>1</sup> Additionally, more guidance is needed regarding what a firm sleeping surface entails and why it is important.<sup>5</sup>

The National Institute of Child Health and Human Development (in collaboration with other organizations) has developed campaign materials for the Safe to Sleep Public Education Campaign. These outreach materials range from general outreach to more specific outreach aimed at reaching grandparents as well as African Americans, American Indians and Spanish speaking caregivers. Materials are also available for health care providers. More information can be found at: [www.nichd.nih.gov/sts/Pages/default.aspx](http://www.nichd.nih.gov/sts/Pages/default.aspx).

## References:

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2. Hauck, Fern R., et al. "Infant sleeping arrangements and practices during the first year of life." *Pediatrics* 122.Supplement 2 (2008): S113-S120. Accessed March 2015. [http://pediatrics.aappublications.org/content/122/Supplement\\_2/S113.full.html](http://pediatrics.aappublications.org/content/122/Supplement_2/S113.full.html).
3. Colvin, Jeffrey D., et al. "Sleep environment risks for younger and older infants." *Pediatrics* 134.2 (2014): e406-e412. Accessed April 2015. [www.pediatrics.org/cgi/doi/10.1542/peds.2014-0401](http://www.pediatrics.org/cgi/doi/10.1542/peds.2014-0401).
4. Fowler, A.J., et al. "Safe sleep practices and sudden infant death syndrome risk reduction: NICU and well-baby nursery graduates." *Clinical Pediatrics* 52(2013): 1044-53.
5. Ajao, Taiwo I., et al. "Decisions of black parents about infant bedding and sleep surfaces: a qualitative study." *Pediatrics* 128.3 (2011): 494-502. Accessed February 2015. [www.pediatrics.org/cgi/doi/10.1542/peds.2011-0072](http://www.pediatrics.org/cgi/doi/10.1542/peds.2011-0072).