

—National Center Quick-Look—



American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN®

Sleep-Related Sudden Unexpected Infant Deaths



Collect

The National Center for Fatality Review and Prevention collects information about sleep-related deaths in the National Fatality Review-Case Reporting System.¹



Data

From 2004 to 2019, fatality review teams reviewed 28,110 infant deaths that occurred while the infant was sleeping or in a sleep environment.



Learn

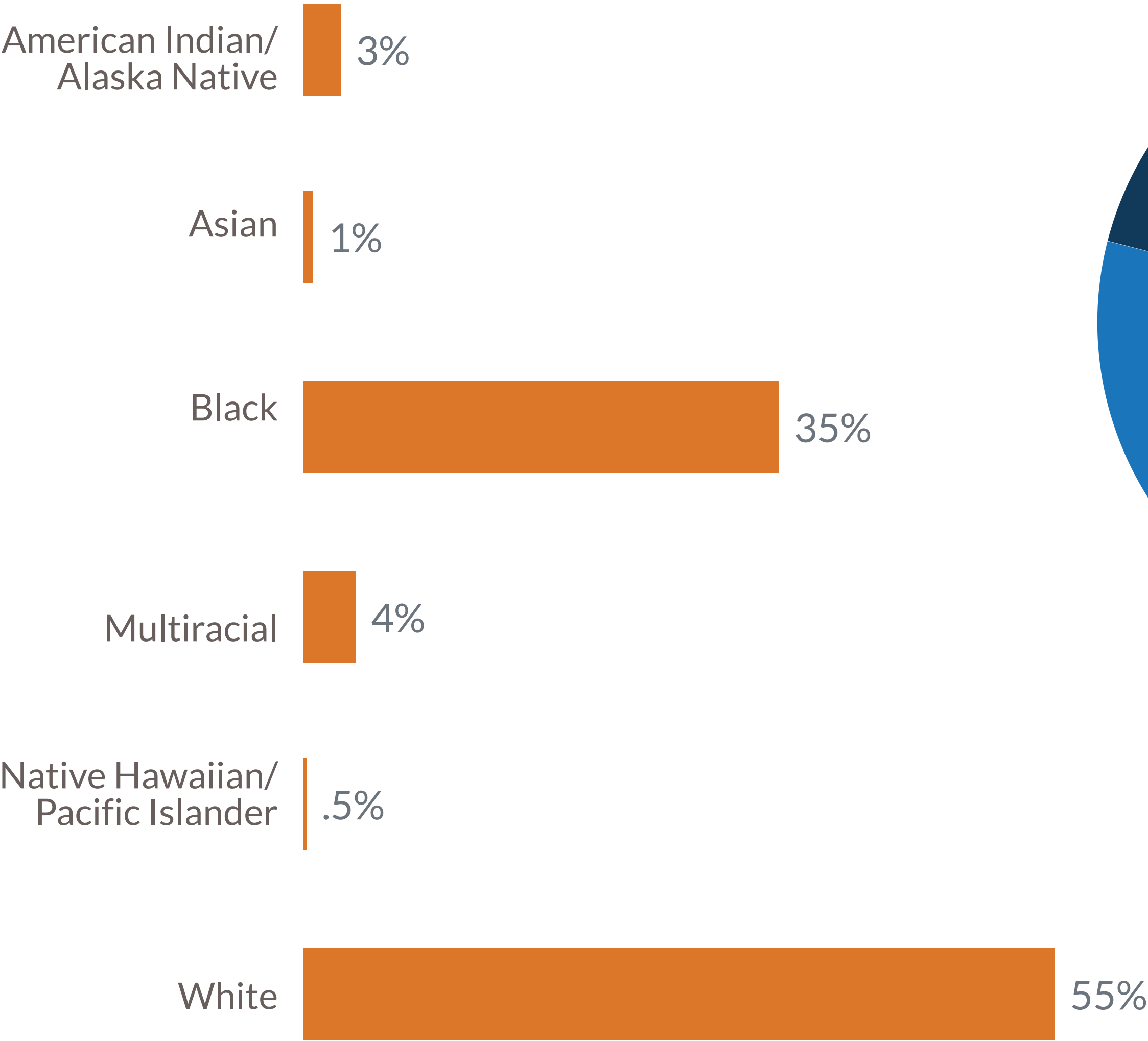
[Read the American Academy of Pediatrics revised policy on infant safe sleep released in June 2022.](#)

Sudden unexpected infant death (SUID) is a term used to describe the sudden and unexpected death of an infant less than 1 year old in which the cause of death is not immediately apparent. Approximately 3,500 infants die suddenly and unexpectedly each year in the US. From 2004 to 2019, fatality teams in 42 states reviewed 28,110 SUIDs that occurred while the infant was sleeping or in a sleep environment.

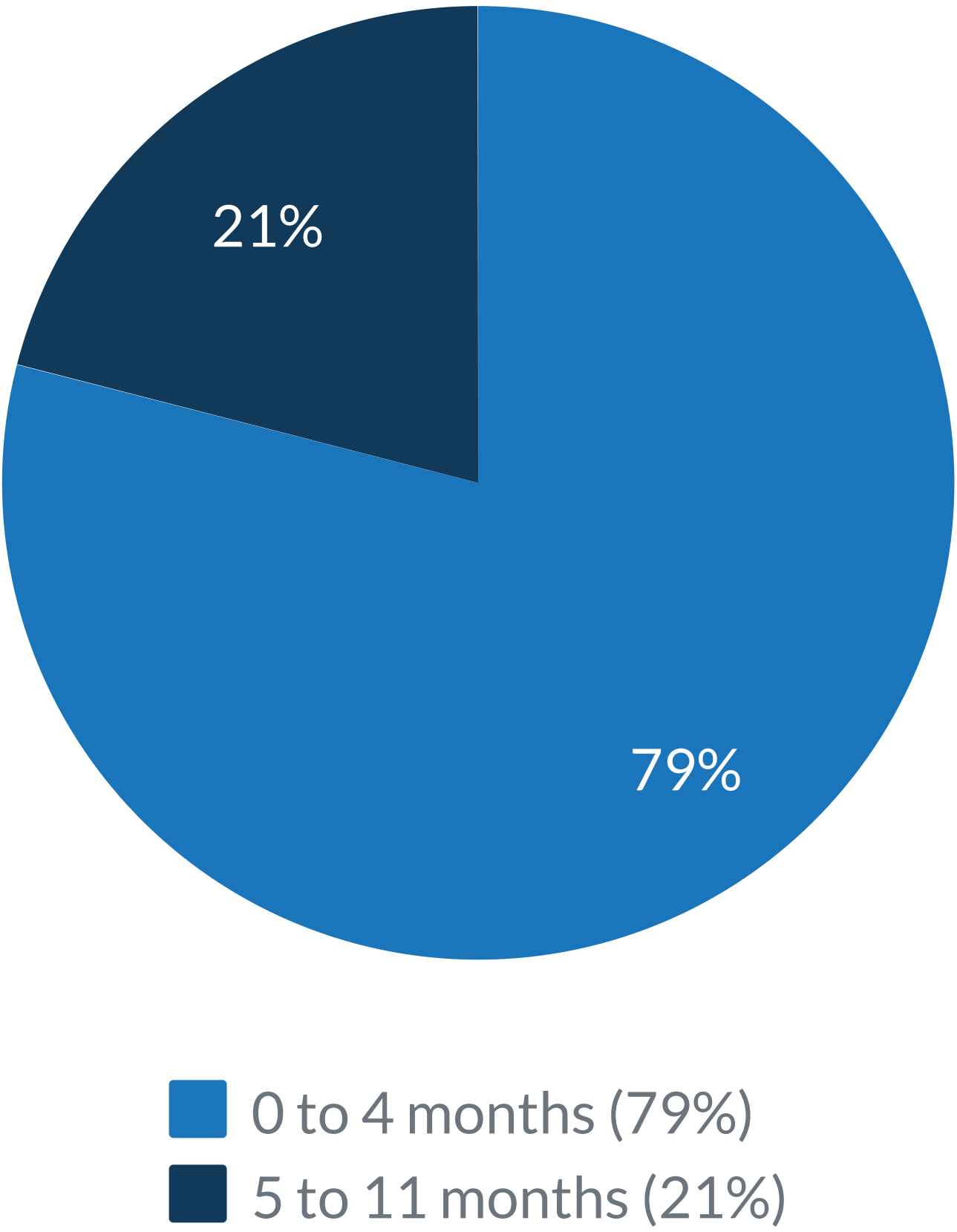
The American Academy of Pediatrics (AAP) has updated its policy recommendations for reducing infant deaths in the sleep environment. Key recommendations on breastfeeding, sleep surface, and sleep location are summarized in this Quick-Look.

Sleep-Related SUID Demographics

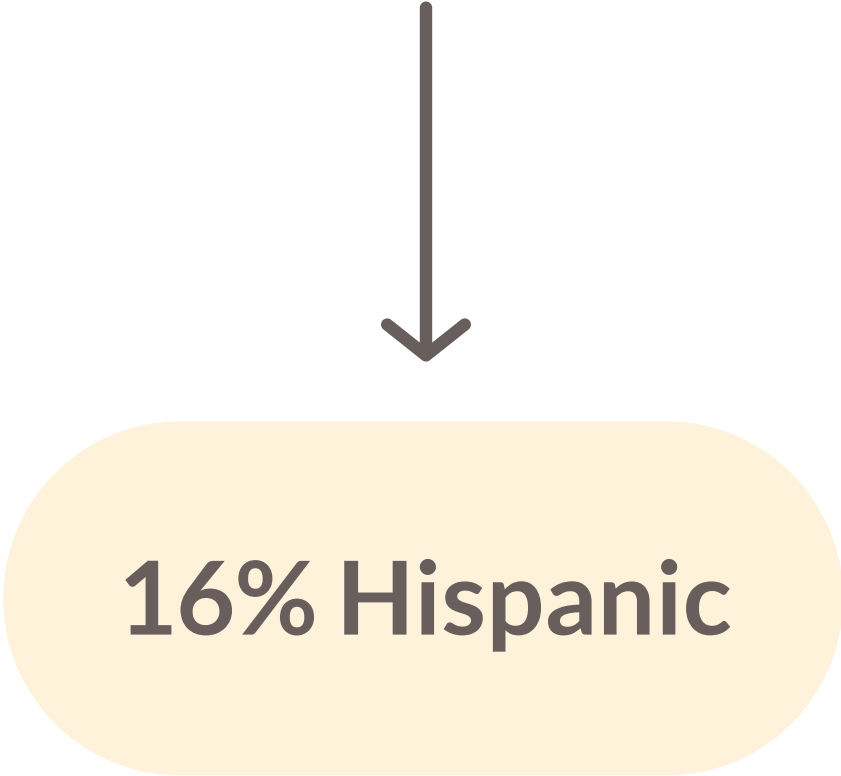
Race



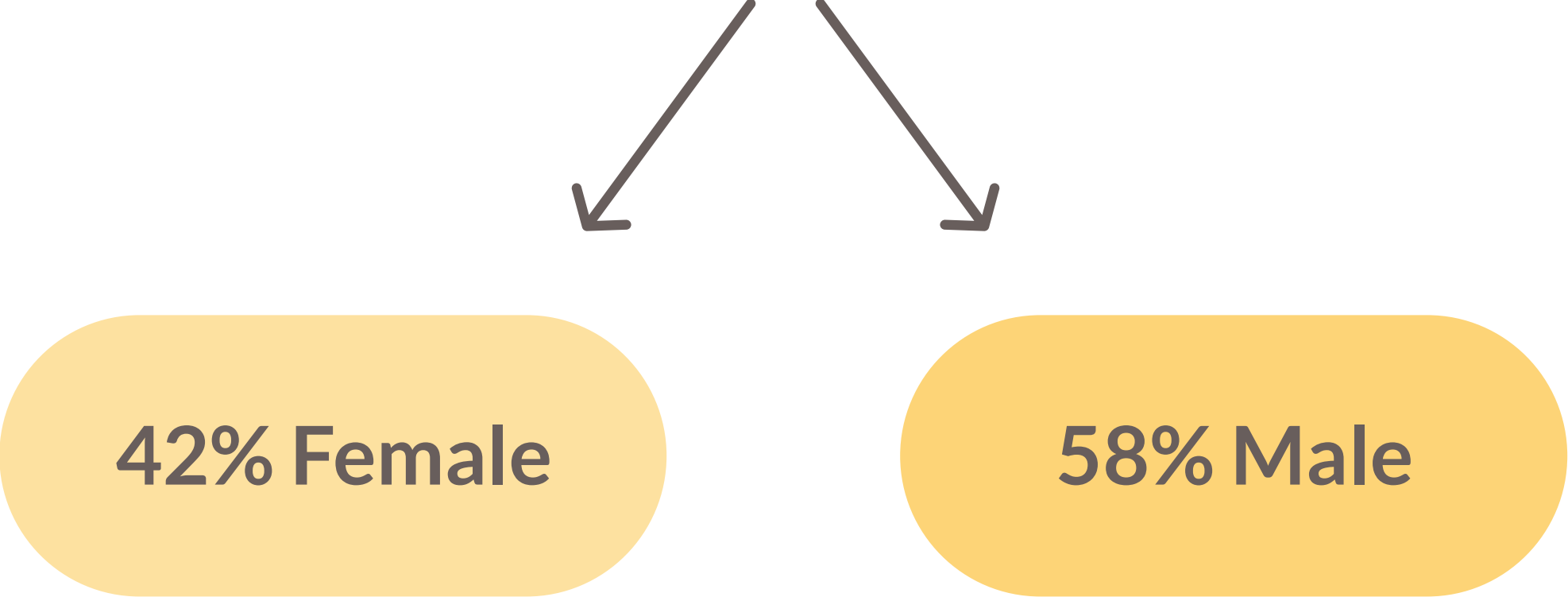
Age



Ethnicity



Sex



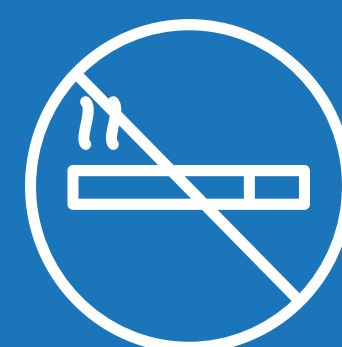
Sleep-Related SUID Characteristics



Birthweight

Infants born preterm or with low birthweight are at increased risk of dying suddenly and unexpectedly.

- 25% were low birthweight
- 24% were born preterm



Smoking

Exposure to cigarette smoke during gestation or after birth places infants at greater risk; avoiding smoke and nicotine exposure before and after birth is recommended.

- 49% of birthing parents smoked during pregnancy
- 49% of infants were exposed to secondhand smoke after birth



Sleep Surface

Infants should be placed on a firm, flat, non-inclined surface that meets Consumer Product Safety Commission safety standards. Of the 28,110 sleep-related SUIDs, infants were placed to sleep on these surfaces:

- 55% adult bed or mattress
- 23% crib, portable crib, or bassinet
- 12% couch, chair, cushion, or pillow
- 4% inclined sitting device
- 3% playpen or other play structure
- 2% makeshift bed
- 1% other surface or in a person's arms



Breastfeeding

Feeding infants human milk is associated with a reduced risk of SUID, and it is recommended that infants be fed human milk exclusively for the first 6 months, if possible.

- 58% were breastfed at least once
- 4% were breastfed at 3 months
- 1% were breastfed exclusively at 3 months

Sleep-Related SUID Location

AAP recommends that infants sleep in a caregiver’s room, close to the bed, but on a separate surface designed for infants. Bed or surface sharing is not recommended.

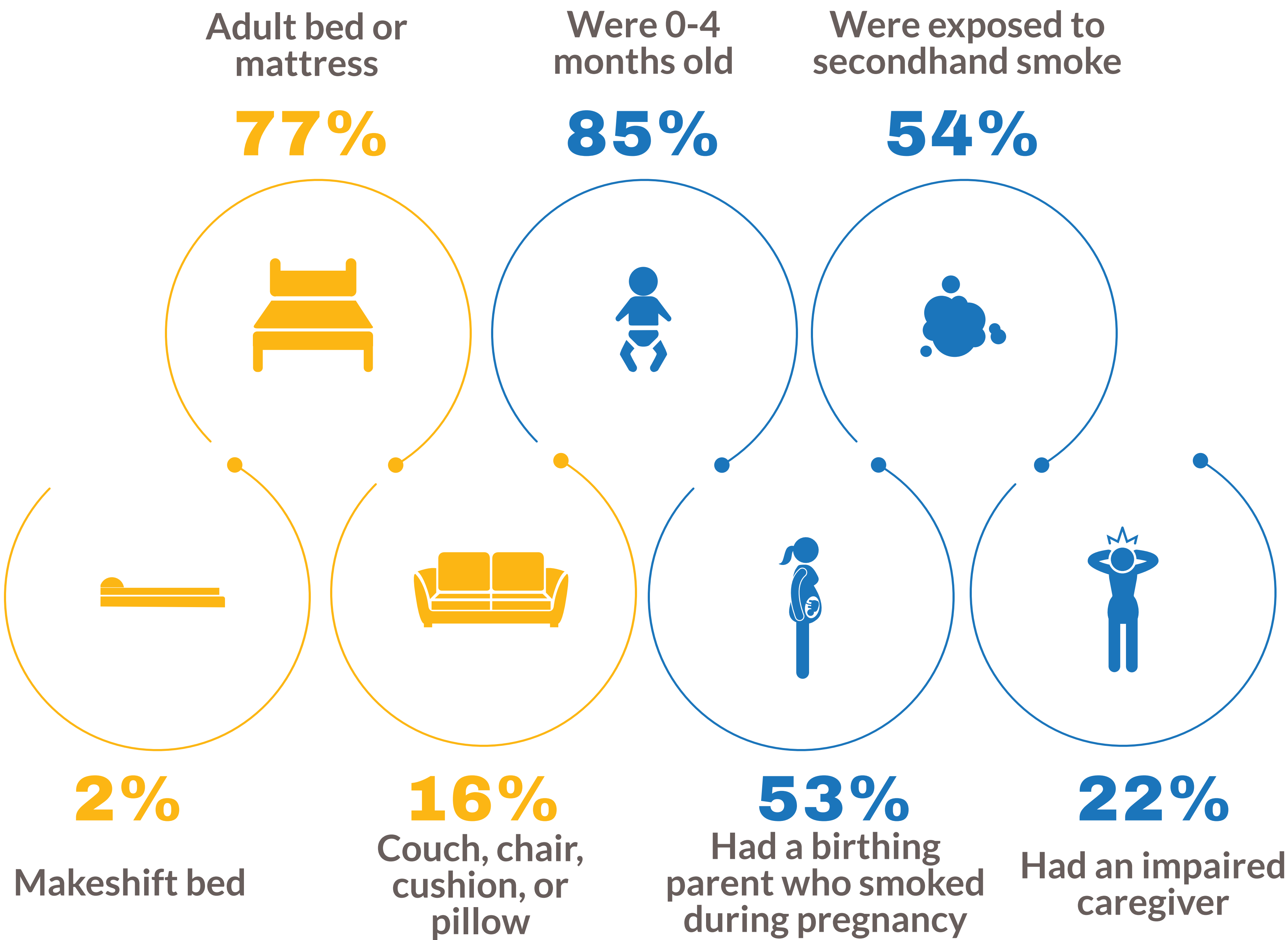
72% of infants sleeping in the same room as a caregiver:



Several factors increase the risk of SUIDs in infants younger than 4 months who are sharing a sleep surface. These include sharing a bed, or other sleep surface such as a mattress, couch, or chair, and having soft bedding or items in the sleep environment.

Infant's shared surface was a(n):

Infants sharing a bed or sleep surface:²



National Center for Fatality Review & Prevention Supporting Fetal and Infant Mortality Review and Child Death Review Teams

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[1] Inclusion criteria: Child left hospital after birth (Neverlefthosp=0), and Death was sleep related (CIRdeathsleepenv=1), and Cause of death was: undetermined if injury/medical (CAUcausedth= 3), or unknown (CAUcausedth=9), or unintentional asphyxia (CAUextinjury=4), or SIDS (CAUmedcond=12), or undetermined external cause (CAUextinjury=10), or unknown external cause (CAUextinjury=99), or undetermined medical cause (CAUmedcond=16), or unknown medical cause (CAUmedcond=99).

[2] More than one answer can be selected.

These data represent a smaller percent of the cases entered into the NFR-CRS. For more information about the data contained in this Quick-Look, please visit https://www.ncfrp.org/wp-content/uploads/NCRPCD-Docs/NCFRP_Quick_Looks_Analysis.pdf