

# Is Cosleeping a Factor in Sudden Unexpected Death in Infancy?

*The frequency of cosleeping among cases diagnosed as SIDS may actually be caused by mechanical asphyxia due to unintentional suffocation by the cosleeping adult and/or compressible bedding materials.*

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*Based on: Person TLA, Cosleeping and Sudden Unexpected Death in Infancy, Arch Pathol Lab Med 2002; 126 (March): 343-345.*

Each year Sudden Infant Death Syndrome (SIDS) is a leading cause of death in infants who are younger than one year of age. Most of these deaths occur between two to four months of age and during the winter. SIDS is essentially a diagnosis of exclusion that could only be made after both a thorough postmortem examination and a thorough scene investigation have been concluded. SIDS is associated with a number of risk factors which include prematurely, low birth weight for gestational age, low weight gain, maternal cigarette smoking, poor prenatal care, illicit drug use, and even histories of sexually transmitted diseases.

Person and colleagues have even reported a 10-fold increase in the risk of SIDS among infants sleeping in parental beds and a 50-fold increased risk among infants sleeping with a parent on a couch. It is this practice of infants cosleeping with adults that has been quite controversial for a period of time and is felt by many to account for a number of cases being misdiagnosed as SIDS.

The purpose of the study was to further elucidate the potential risk of cosleeping and the relationship of cosleeping to sudden unexpected death in infancy. The authors did a retrospective review on autopsy files of cases occurring between 1991 and 2000 on infants younger than one year of age. The files consisted of reports of postmortem examinations performed for up-state New York County Coroner's Offices and included deaths in which the cause was listed as "SIDS" and "undetermined." Cases were excluded if there were any significant medical history that could have contributed to the infant's death, or if there was investigated findings suggestive of trauma or abuse. Data collected included race, age, sex, medical history, and the cause and manner of death. Investigative information was obtained about the circumstances of the infants' deaths, including where the child was sleeping and whether the child was sleeping alone or with another individual.

In total, 56 cases were reviewed consisting of 39 males and 17 females. Thirty-nine of the 56 infants were Caucasian. One was Hispanic, and 16 were African American. Ages ranged from one day to nine months, with a mean of 2.8 months in age. Twenty-three of 56 infants were found unresponsive in their cribs, whereas 19 were found in adults beds and 12 on couches. One infant was found sleeping in a dresser drawer while another was found sleeping in a car seat on the floor. Twenty-nine of the 56, 51.8 percent, were sleeping alone, whereas 27 were cosleeping, that is 48.2 percent. Of this later group, 15 infants were cosleeping in an adult bed with an adult or adults. Whereas nine were sleeping with an adult on a couch while four slept with a twin in a crib. Eleven of the 23 cosleeping cases had been previously diagnosed as SIDS as were the three infants who

were found sleeping alone on a sofa. In seven of the 23 cases of infants cosleeping with adults, the adult was documented to be intoxicated. Of the 29 infants sleeping alone, 19 were in cribs, five in adult beds, three on couches, one in a dresser drawer on a floor and one in a car seat. The deaths of those infants sleeping alone in adults beds were diagnosed as SIDS.

In conclusion, the authors found that 48 percent of the infants in their study who died unexpectedly and had no distinct autopsy findings were cosleeping. Most of these cases had been diagnosed as SIDS, but the high incidence of cosleeping suggested to them that external factors might have contributed to some of these deaths. Their findings tend to support other recent studies that suggest that cosleeping or placing an infant in an adult bed is a potentially dangerous practice. The authors feel that possible factors contributing to the deaths of these cosleeping infants include unintentional suffocation due to overlay by an adult and/or entrapment in bed structures. I whole-heartedly agree with this study that cosleeping or placing an infant in an adult bed is potentially dangerous, life-threatening practice.

# Sofas Are Dangerous Environment for Infants

*Take Home Pearl – The common couch is dangerous for the sleeping infant. Sleeping infants are at risk for asphyxial deaths from both overlaying and wedging.*

Objective: To review a group of unexpected infant deaths that occurred while the infants were sleeping on a sofa, and to indentify common features, if present.

Methods: Coronial files from South Australia and medical examiner files from San Diego County were searched for unexpected deaths of infants who were sleeping on a sofa. The study encompassed a combined total of 18 years from the 2 jurisdictions. Cases accepted for study must have had a complete evaluation including complete description of the scene. The case materials were scrutinized for details of the position of the infant with respect to the sofa and sleeping partner, if applicable.

Results: There were 542 unexpected infant deaths during the study period attributed to sudden infant death syndrome (SIDS), asphyxia, or undetermined case. Twenty-three cases were infant deaths on a sofa, 10 of which had complete descriptions of the scene (as well as autopsy information). There were 5 male and 5 female infants ranging in age from 1 to 16 weeks. Four cases were signed out as SIDS, and 6 were considered accidental asphyxia deaths. The asphyxia cases consisted of 4 adult co-sleeping cases and 2 wedging cases. At least 2 of the co-sleeping cases involved ethanol intoxication.

Conclusions: The sofa should be on the list of sleep environments that present a risk to a sleeping infant. The seat and back cushions are compressible and easily moved. The sharp angle between the seat and back cushions may present a dangerous local environment for the small, poorly mobile infant. The relatively narrow seating area of a couch may be especially dangerous when an adult uses the couch as a cleeping surface or when an adult is nursing an infant and falls asleep. Finally, the authors remind readers that use of SIDS as a cause of death in the setting of a couch should be used cautiously, ensouring that all criteria are met.

Reviewers: Marcus B. Nashelshky, MD Article Reviewed. *Specific Dangers Associated With Infants Sleeping on Sofas. J Pediatric Child Health 2001: 37: 476-478.*