

Pathology Biology Section - 2003

G93 Mother/Infant Co-Sleeping/Bed-Sharing and Sudden Infant Death Syndrome

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The goals of this presentation are to present to the forensic community a review of mother-infant co-sleeping and bed-sharing practices; to differentiate "safe" from "unsafe" co-sleeping conditions; to understand that, when done safely, bed-sharing/co-sleeping may actually be protective against death due to SIDS.

Deaths which remain unexplained after a thorough medicolegal death investigation can be the source of great frustration for forensic pathologists. Several categories of unexplained deaths are known within the forensic community, but for many, no category of deaths is as frustating as Sudden Infant Death Syndrome (SIDS) cases. SIDS remains one of the great mysteries within the world of medicolegal death investigation. As such, theories as to the underlying cause or causes of SIDS have been and remain plentiful. Many risk factors have been identified, but most forensic pathologists know of several cases of SIDS occuring in infants with no identifiable risk factors. Whether or not a particular risk factor actually plays a role in SIDS can be controversial, and the implied blame that can accompany the identification of a particular risk factor can lead to feelings of guilt in the parents or other caregivers.

Within the forensic community, one of the most widely acknowledged *potential* causes of a SIDS-like death is overlay, an accidental asphyxial death related to another person lying on top of or wedged against the infant. Consequently, whenever an infant death occurs where the infant is sleeping with or next to another individual, it is important to consider the possibility of death by overlay. Depending on the forensic pathologist certifying such a death, a case where overlay is a possibility (but not necessarily proven) may be certified as a death due to overlay, SIDS, undetermined causes, or some other variation.

Because of the potential risk for overlay, there has recently been a national campaign against "co-sleeping/bed-sharing" with infants. Although the prevention of overlay deaths is an appropriate and worthwhile goal, the unconditional implication that any form of adultinfant co-sleeping is harmful is inappropriate, untrue, and not supported by scientific research. Part of the problem clearly stems from a lack of understanding of the terminology used in this debate. For example, "bed-sharing" is a form of co-sleeping, but there are other forms of cosleeping that do not involve bed-sharing.

Another very important factor that is frequently overlooked is the nature of the maternal-infant relationship, including whether or not the mother is breastfeeding her infant. With respect to maternal-infant wake/sleep patterns, maternal and infant attentiveness and response, and similar parameters, it is inappropriate to consider the breastfeeding mother-infant night-time relationship equivalent to a nonbreastfeeding mother-infant relationship. Add to the latter relationship such factors as maternal drug or alcohol use and inappropriate sleeping conditions (such as a sofa) and it becomes clear that there are two ends of a spectrum when it comes to co-sleeping (and bed-sharing). At one end, there are the breastfeeding mothers who tend to be very attentive to their babies' needs, while at the other end, there are the mothers who are not so attentive and may, in fact, be careless. In other words, there are unsafe ways in which to cosleep/bed-share, and there are safe ways in which to co-sleep/bed-share. A categorical condemnation of every form of cosleeping/bed-sharing may indeed prevent accidental overlay deaths in certain infants; however, such a policy might also adversely affect infants who are otherwise a part of a safe co-sleeping/bedsharing relationship. Data from previously-reported and ongoing studies of mother-infant sleep patterns will be presented, showing that in otherwise safe sleeping conditions, co-sleeping/bed-sharing may actually protect against SIDS. As the debate continues within the forensic community about how to certify SIDS-like cases in the setting of co-sleeping/bedsharing, it is important that forensic pathologists be aware of all available information regarding this topic.

Sudden Infant Death Syndrome, Co-Sleeping, Bed-Sharing