

G94 Death Certification in Sudden Infant Death Syndrome and Related Infant Deaths

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Upon completion of this presentation, attendees will become familiar with a newly-proposed method for certifying SIDS and SIDSlike deaths and to become involved in the dialogue concerning certification of such deaths.

For an infant death to be considered due to "Sudden Infant Death Syndrome" (SIDS), a complete death investigation and autopsy, including toxicology, must be negative, and the infant must be less than 1-year-old. The "classic" SIDS scenario involves an infant, typically less than 6-months-old, who is found dead in his/her crib. Known risk factors include low socioeconomic status, parental smoking, prone sleeping position, formula-feeding, and a history of prematurity. Within the past 10 years, a campaign by public health agencies and pediatricians to advocate a supine sleeping position has purportedly resulted in fewer SIDS deaths. Amongst forensic pathologists, a trend has been noted that there are fewer and fewer "classic" SIDS cases. Whether this is related to the sleep position campaign, better information-gathering, different methods of death-certification, or a combination of these is not known. Be-that-as-it-may, many SIDS-like cases occur where certain known risk-factors are clearly identified. A potentially unsafe sleeping environment is a factor that is increasingly being recognized as a possible cause in some of these deaths. Ultimately, these and the other known risk factors for SIDS may cause potential interpretive difficulties for forensic pathologists, thus creating death certification dilemmas.

A recent proposal in the National Association of Medical Examiners' "A Guide For Manner of Death Classification" (in draft form) relates to the certification of SIDS and SIDS-like deaths. In this proposal, it is suggested that various items from the scene investigation/history which cause potential interpretive difficulties (such as bedsharing or being found face down on a soft pillow) should be listed in part II of the death certificate, with part I listing "Sudden Infant Death Syndrome" or "Findings consistent with SIDS." In this presentation, a series of cases will be presented, ranging from classic SIDS to accidental overlay, with many cases including one or more items causing interpretive difficulty. In each, the circumstances of death, the autopsy findings, and the death certification using the newly-proposed method will be presented. Discussion will include the potential controversies concerning which items/risk factors warrant inclusion in part II of death certificate; other options for relaying information about these items/risk factors will also be addressed. Through the presentation of a series of example cases, the authors hope to foster more discussion and dialogue about this very important issue.

Sudden Infant Death Syndrome, Death Certification, Cause of Death