

Is there a brainstem-SIDS connection?

Sudden infant death syndrome, or SIDS, is the sudden, unexpected and unexplained death of a baby under one year of age. It is the most common cause of infant death in developed countries, and affects close to 3,000 babies each year in the United States alone. The incidence of SIDS peaks at two to four months, with 95 percent of the cases occurring prior to the time a baby is six months old. Researchers believe that many factors may combine to cause SIDS.

There is compelling evidence that a brainstem-SIDS correlation exists. Numerous medical and chiropractic researchers have suggested the relationship between SIDS and the brainstem, spinal cord or upper cervical spine. More than 100 research studies point to the brainstem as a critical link to SIDS. Researchers Lucena and Cruz-Sanchez state, "Brainstem dysfunction of circuits that control respiration and cardiovascular stability may be involved in SIDS. It is postulated that this abnormality originates in utero and leads to sudden death during a vulnerable postnatal period."(5)

It has been theorized that a traumatic event occurring before and during a baby's birth may increase his risk of SIDS. Many infants autopsied have had an immature or a damaged brainstem. Spinal cord hemorrhage has often been found to be the principal lesion. This can be a very mild trauma, often escaping notice of those performing the autopsies.

Research clearly points to a reduction in deaths from SIDS when a baby is placed on her back to go to sleep. But, interestingly enough, it has never been established why these reductions in deaths occur with a change in sleeping position, though Dr. Hannah Kinney, author of a study funded by the National Institute of Child Health and Human Development, stated, "We think this fits in with the rebreathing theory -- that infants sleeping in the prone (stomach) position are rebreathing trapped air and, unable to sense and respond to the excess carbon dioxide, die suddenly." (3)

It seems no accident that the incidence of SIDS has declined with the back-to-sleep recommendation. Chiropractically, it is quite clear that putting an infant to sleep on her back is a less stressed position for any spine -- especially one that is already compromised.

References:

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