

STATE OF WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Bill J. Crouch Cabinet Secretary

February 9, 2018

The Honorable Mitch Carmichael, President West Virginia Senate State Capitol Complex Room 229M, Building 1 Charleston, West Virginia 25305

The Honorable Tim Armstead, Speaker West Virginia House of Delegates State Capitol Complex Room 228M, Building 1 Charleston, West Virginia 25305

Dear President Carmichael and Speaker Armstead:

As required by West Virginia Code §16-1-6(p), enclosed please find the Sudden Unexplained Infant Death (SUID) report for calendar year 2015. This report is provided by the West Virginia Department of Health and Human Resources, Bureau for Public Health, through the Office of Maternal, Child and Family Health.

If additional information is needed, you may contact Christina Mullins, Director, Office of Maternal, Child and Family Health, at (304) 356-4392 or e-mail at <u>Christina.R.Mullins@wv.gov</u>.

Sincerely,

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Bill J. Crouch Cabinet Secretary

BJC:tm

Enclosure

cc: Rahul Gupta, MD, MPH, FACP Anne Williams Christina Mullins Steve Harrison Lee Cassis Legislative Library



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West Virginia Sudden Unexplained Infant Deaths

Calendar Year 2015 (January—December)



Office of Maternal, Child and Family Health 350 Capitol Street, Room 427 Charleston, WV 25301 Melissa Baker, MCH Epidemiologist

SUDDEN UNEXPLAINED INFANT DEATH ANNUAL REPORT January through December 2015

Sudden unexpected infant death (SUID) is any infant death (a child under one year of age) that is unexpected and initially unexplained. SUID describes the sudden death of an infant that remains unexplained following autopsy, review of medical records and death investigation performed by the medical examiner. Characteristically, these deaths occur quickly and usually during a sleep period; in most cases, the baby seems healthy. Both are referred to as SUID since all are unexpected and most are ultimately determined unexplained.

These unexplained deaths were formerly attributed to Sudden Infant Death Syndrome (SIDS), but recognition by the medical community of limitations in detecting accidental and non-accidental asphyxia in infancy has led to a nationwide change in diagnostic terminology. As a consequence, the use of "SUID," a diagnostic term which encompasses the possible contribution of asphyxia, as well as other avoidable injuries, to sudden infant death, has gradually replaced the "diagnosis" of SIDS. SUIDs is now the major cause of death in babies from one month to one year of age.

During calendar year 2015, there were 23 resident SUID deaths reported by the West Virginia Department of Health and Human Resources (DHHR), Health Statistics Center. These infant deaths were identified with a cause of death listed on the death certificate as ICD codes R95–R99 (Sudden Infant Death Syndrome, Other Sudden Death, Cause Unknown and Other III-Defined and Unspecified Causes of Mortality) and W75 (Accidental Suffocation and Strangulation in Bed). These unexpected/unexplained infant deaths are the deaths included in this report.

Medical examiners and scene investigators identify SUID risk factors that include

hazardous sleeping environments such as co-sleeping/bed-sharing, very soft or uneven bedding surfaces and heavy bedding, maternal smoking as well as smoke exposure in the home and caretaker impairment. The findings are recorded on death certificates, in autopsy reports and in scene investigation reports for the use of public health and safety professionals.

The following tables offer summaries of the demographics and identified risk factors of SUID deaths occurring in West Virginia resident infants during calendar year 2015. Data reporting sources include DHHR's West Virginia Health Statistics Center, West Virginia Birth Score Program and West Virginia Office of the Chief Medical Examiner. Demographics and risk factors include the month of death, county of residence, age at death, sex of infant, race of infant, the position of the infant when placed to sleep and position found, type of bedding, smoking status of mother during pregnancy, smoking status in the home, prenatal care initiation, co-sleeping/bed-sharing, gestation, birthweight, Birth Score, Medicaid status and caretaker impairment. It is important to note that information on out-of-state births and deaths is not always available and is, therefore, shown as "unknown." Also, information for in-state births and deaths that is missing or left blank on the investigative report or other documents is also shown as "unknown."

The most prevalent identified risk factors in SUID deaths for 2015 were cosleeping/bed-sharing, hazardous bedding and smoke exposure. Co-sleeping/bedsharing was reported in 65% of cases, hazardous bedding was reported in 87% of cases and smoke exposure (maternal or household) was reporting in 57% of cases. These risk factors are the most modifiable behavioral factors that could significantly impact the rate of infant deaths, specifically SUIDs.

Research shows that firm bedding, placing the infant on his/her back to sleep in an appropriate infant sleep product such as a crib, not smoking cigarettes prenatally or

exposing infant to second hand smoke and not co-sleeping/bed-sharing with the infant can be effective preventive measures in reducing SUIDs.

DHHR's Bureau for Public Health, Office of Maternal, Child and Family Health (OMCFH) has been an ongoing participant in the national *Back to Sleep* campaign since its inception in 1996 and continues to participate in the expanded *Safe to Sleep* campaign. OMCFH continues to disseminate pertinent, current information about risk factors such as co-sleeping/bed-sharing, early prenatal care, maternal smoking during pregnancy, infant exposure to second hand smoke and a safe sleeping environment. OMCFH also continues to make ongoing efforts to provide current, relevant educational material statewide to health care providers as well as parents, grandparents and other caregivers of West Virginia's infants.

WEST VIRGINIA SUIDs January through December 2015

It is important to note that information on out-of-state births and deaths is not always available and is therefore shown as "unknown." Also, information for in-state births and deaths that is missing or left blank on the investigative report or other documents is shown as "unknown."

Deaths by Month												
Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
3	1	3	1	3	3	1	0	0	2	3	3	23

	Deaths by Sex of Infant	
Male	Female	Total
13	10	23

	Deaths by Race of Infant							
White	Black	Bi-Racial	Unknown	Total				
21	1	1	0	23				

Deaths by County of Residence							
Berkeley	Boone	Harrison	Jackson	Logan	McDowell		
1	2	1	1	2	1		
Mercer	Mineral	Mingo	Monongalia	Nicholas	Preston		
1	1	1	1	1	1		
Raleigh	Randolph	Wayne	Wetzel	Wood	Wyoming		
4	1	1	1	1	1		
Total							

23

	Deaths by Age of Infant in Months						
<1	1	2	3-5	6-8	9-12	Total	
2	7	5	7	2	0	23	

Deaths by Infant Birth Weight*						
Normal	Low	Unknown	Total			
20	3	0	23			

*Normal: >2500 grams Low: <2500 grams

Deaths by Gestation*					
Full Term	Premature	Unknown	Total		
18	5	0	23		

*Full Term: >37 weeks Premature: <37 weeks

Deaths by Co-Sleeping/Bed-Sharing						
Yes Co-Sleeping/Bed- Sharing	No Co-Sleeping/Bed- Sharing	Unknown	Total			
15	8	0	23			

Deaths by Type of Prenatal Care						
Early Prenatal Care*	Late Prenatal Care	No Care	Unknown	Total		
16	4	0	3	23		

*Entered first trimester

Deaths by Type of Bedding						
Appropriate Bedding	Hazardous Bedding*	Unknown	Total			
1	20	2	23			

*Any bedding other than crib with no other sleeping environment risks

	Deaths by Position of Infant Placed to Sleep							
On Back	On Side	On Stomach	Unknown	Total				
11	2	6	4	23				

	Deaths by Position of Infant When Found							
On Back	On Side	On Stomach	Unknown	Total				
6	4	10	3	23				

Death	Deaths by Smoking Status of Mother During Pregnancy				
Smoking	Non-Smoking	Unknown	Total		
13	10	0	23		

Deaths by Smoking Status in the Home				
Smoking	Non-Smoking	Unknown	Total	
10	7	6	23	

Deaths by Birth Score*				
Low	High	Unknown	Total	
15	5	3**	23	

*Scores above 99 considered high and at-risk infants, scores below 99 considered normal and low-risk infants

** No Birth Score reported - includes 1 out-of-state birth

Deaths by Medicaid Status			
Yes	No	Unknown	Total
21	1	1*	23

*Includes 1 out-of-state birth – no information available

Deaths by Caretaker Drug/Alcohol Impaired*			
Yes	No	Unknown	Total
4	10	9	23

*Variable first added in CY 2011 report due to number of cases indicating impairment but still not captured consistently