



Sudden Unexplained Infant Death (SUID) in Georgia

INTRODUCTION

In 2009, Georgia joined the National Center for Child Death Review (NCCDR) and the CDC SUID Case Registry to record detailed information on infant sleep-related deaths, as reported by local Child Fatality Review (CFR) teams. This is a 3-year funded pilot project.

PRE (2009) - POST (2010-11) DATA

COMPLETENESS **Analysis of missing/unknown variables, and improvements in completeness of reporting**

“Gestational Age” increased 93.8%

“Birth Weight” increased 96.8%

“Weight at death” increased 82.1%

“Latino origin” increased 92.4%

“Child put to sleep” position increased 61.8%

“Child found position” increased 45.2%

DATA DRIVES PREVENTION (N=192 cases)

Sleep Environment

- 163 of the infant deaths were not in a crib (84%); 103 of those were sharing the sleep surface with another person (63%)
- 30 infants were found in a crib (16%) and of those, 14 were on their stomach (47%)

Age at Death

- 117 of the infants were 2-4 months of age (61%)
- 157 were under 6 months of age (81%)

Prenatal Health

- 63 mothers smoked tobacco before their pregnancy (33%); In 62 cases, the mother reported tobacco use during her pregnancy
- 154 mothers had prenatal care (80%); 78 started in the first trimester (41%)
- 17 (13%) of the 130 infants born full term (>37 wks) were considered low birth weight (<5lb 8oz)

Demographics

- 3 multi-race; 80 white (42%); 107 black (56%); 2 Hispanic
- 75 girls (39%); 117 boys (61%)

ACTIVITIES

- Distributed scene re-creation dolls to all 159 county coroners, medical examiners and law enforcement (\$8,600 for 200 dolls and shipping)
- Provided netbook computers to local CFR teams who lacked access to internet during review meetings, to facilitate faster reporting times (\$10,079 for 32 computers)
- Delivered 25 trainings to scene investigators and CFR teams on how to identify and report infant sleep-related deaths (\$11,880 for facility rentals and printing)
- Offered financial incentive for coroners/MEs to provide scene investigation data reports within 7 days of death (\$2,992 for 34 reports)
- Provided constant, personal support at review meetings (for high-volume metro counties) to assist in more complete, accurate reports
- Provided GBI death notifications to teams within 30 days to start their 90-day review process
- Data sharing MOUs with Vital Records, State Medical Examiner, and Coroners Association

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