

# Minnesota Sudden Infant Death Center

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Newsletter  
Volume 32  
Fall/Winter 2012

Children's Hospitals and Clinics of Minnesota | 2525 Chicago Ave. S. | Minneapolis, MN 55404 | 612.813.6285 | 1.800.732.3812

## Is There a Positive Side to This Pain?

By Daina Mahon

I recoil, even reel, when I sometimes hear that there could be anything positive about a child dying before her/his parents. I've never been one of those "glass half-empty" types, nor am I a "Pollyanna" person encouraging and always looking for the best in people even if I felt disappointed in their behavior. Consequently, when my only child died, not only did I lose my bearings, I lost my cheerful nature and the ideal that all would be right with the world in spite of present circumstances.

How does one recover the ability to be upbeat and optimistic when the heart is an open chasm? I have a friend whose son died two years after my daughter died. When we had lunch a few months into her grieving she said, "I have never been a sad person. I can't see myself as a sad person". When I heard her words at the time I did not say what I should have because I knew she felt like she had lost her identity, just as I felt I had lost mine. I would like to have said, "Sadness over the death of your son is acceptable, needful and may bring deeper wisdom than the rest of the world can grasp."

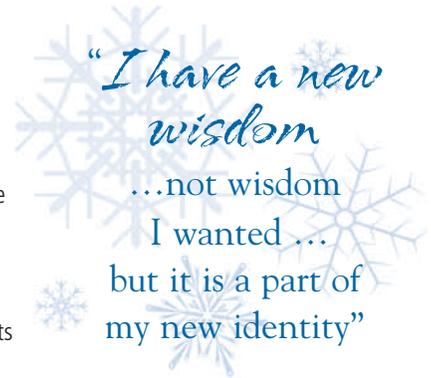
Bereaved parents often have to deal with their own identity crisis. The new identity of the role of "parent-of-a-deceased-child" in our culture is interpreted as no longer being a parent. If one has a living child whose sibling has died, our cultural belief seems to be, "you have so much to live for; carry on as you always have before". In both cases, the burden is placed on the bereaved to adapt quickly, and just continue life. We, of course, know that it is impossible. Our identity crisis remains, and the landscape of our lives is foreign.

As I have muddled through my new role, I have made discoveries about myself and about others. I have discovered that I know what I need. I have discovered that my intuition about what I need must be listened to or I will not only regret having a deaf ear, but I will deal with the consequences of not listening to my inner voice.

Have you ever found yourself in this situation? You know your energy is low. You know you are having a hard time coping with the everyday conversations about gas prices, politics, lazy children, insensitive teachers, inconsiderate spouses, etc. Yet, you force yourself to go to the family gathering or dinner with friends. You find yourself beginning to seethe at the triviality of the conversations and you attempt to make a graceful exit

but manage to offend by lashing out at someone's quip. Or, you come off as curt when you attempt to explain that you are just not ready to participate even though they have said "you look good and seem so much better". *Lesson learned*, I thought at the time. *Pay attention to your own needs. You know when you can or cannot cope; you know when you can take part. Well-meaning though someone may be, they really do not know what you need.*

Maya Angelou wrote: "It is healthy and honorable to weep the loss of someone we love; healthy because such passion must be released; honorable because it is respectful to admit the importance of people who have loved and supported us...people whose footprints cannot ever be matched".



*"I have a new wisdom  
...not wisdom  
I wanted ...  
but it is a part of  
my new identity"*

Of late, I have begun to realize that I have a new wisdom in my life. It is not wisdom I wanted, and it is against my will, but it is a part of a new identity. I recognize myself in this new wisdom. I see my daughter's wisdom in my own. She felt comfortable with her humanness. I did not always have that; now I do. So, in a way, that is a positive in my pain. I have gained wisdom to be compassionate when I don't understand what someone else is going through. I have gained the wisdom of strength when facing the insurmountable. (haven't we been through the worst?) I acknowledge that grief brought the wisdom to be helpful to others who are newer than I to this grief journey. Wisdom is of much value in this world. Wisdom is to be cherished. Our new identities have given us something to be treasured. That is of worth. Wisdom is positive in the midst of pain.

*Daina Simpson Mahon is a bereaved parent and educator whose daughter, Devin, was killed in a bike accident. This article is reprinted with permission from [Grief Digest Magazine](#), October 2012.*

# 12th Annual International Research Conference

Staff had the opportunity to attend the 12th annual International Conference on Stillbirth, SIDS and Infant Survival. Held every two years in countries worldwide, this year's conference was hosted by First Candle and held in Baltimore, Maryland. The conference consisted of three days of sessions presenting research being conducted in 50 countries including the United States. For an overview of the conference, or to download a copy of the Conference Program Book, visit [www.firstcandle.org](http://www.firstcandle.org).

The following article is one of the abstracts presented by a research team from the US. It suggests that brain abnormalities may underlie sudden infant deaths associated with tummy sleep position and bed sharing. Additional comments from Dr. Patrick L. Carolan, MN SID Center medical director, are included.

## Neurochemical Brainstem Pathology and Potential Asphyxia on Sudden Unexplained Infant Deaths

By Randall BB, Paterson DS, Haas EA, Broadbelt KG, Krous HF, Trachtenberg FL, Kinney HC. University of South Dakota Sanford School of Medicine, Children's Hospital Boston, Rady Children's Hospital, New England Research Institutes, USA

### Background and Hypothesis:

Circumstances consistent with asphyxia in unsafe sleep environments at the time of death are known to increase the risk for SIDS more than 3-fold, raising the possibility that otherwise normal infants die of asphyxia in these environments. Potential asphyxia-generating circumstances include prone and face-covered sleep position, excessive bed clothing, and bed sharing, the latter with the possibility of overlaying. We postulate that at least some SIDS infants, however, are not completely healthy, but rather, have an underlying brainstem abnormality in neural networks that mediate protective responses to asphyxia, resulting in sleep-related sudden death. Over the past two decades, we have reported abnormalities in inter-related neurochemical parameters in the same SIDS cases in such a homeostatic network in the medulla oblongata (lower brainstem). The parameters are related to the neurotransmitters serotonin (5-HT) and  $\gamma$ -aminobutyric acid (GABA) and the signal transduction family 14-3-3 that is involved in 5-HT regulation. In this study, we tested the hypothesis that cases of sudden and unexplained infant death (irrespective of the label "SIDS") were associated with both asphyxia risks and reduction in 5-HT, GABA, and/or 14-3-3 parameters in medullary regions related to cardiorespiratory control as compared to control infants dying of known causes of death.

**Methods:** The dataset involved 44 cases from the San Diego medical examiner's system in whom neurochemical data were available in the CHB laboratory from samples in the last decade. The neurochemical procedures included tissue receptor autoradiography (5-HT1A and GABBA receptor binding), high performance liquid chromatography (5-HT levels), and western blotting (14-3-3 subtypes, tryptophan hydroxylase 2). The study cases of death were assigned after review of the reports of the death scene investigation and autopsy records by a long-time medical examiner (BBR) who was blinded to the neurochemical data. No cases of possible hyperthermia were included in order to examine independently the role of positional asphyxia.

**Results:** Medullary measures of 5-HT1A and GABBA receptor binding, and levels of several 14-3-3 subtypes were significantly lower ( $p < 0.05$ ) in the cases with sudden infant death and potential asphyxia-generating conditions ( $n=35$ ) compared to controls with known causes of death ( $n=9$ ).

**Conclusion:** These data suggest that infants with sudden unexplained death (irrespective of the label SIDS) who die in circumstances potentially related to asphyxia demonstrate neurochemical abnormalities in the medullary homeostatic network compared to infants dying of known causes. Thus, an intrinsic brainstem abnormality may underlie at least some cases of sudden infant death in association with prone sleep position and bed sharing. This underlying abnormality may put the infant at risk for sudden death possibly triggered by asphyxia.

*Grant support: NICHD (HD20991), First Candle, CJ Foundation for SIDS, Jacob Neil Boger Foundation for SIDS, and Marley Jaye Cherella Foundation for SIDS.*

### Comment: By Patrick L. Carolan, Medical Director, MN SID Center

Use of the term "sudden unexplained infant death" or SUID has evolved as an umbrella term to include, along with SIDS, infants whose deaths occur in association with factors present within the sleep environment. In conjunction with SUID, terms like positional asphyxia, mechanical suffocation or bed-sharing with overlay may be used reflecting factors that were identified in the death scene evaluation which appeared to interfere with normal infant breathing during sleep. Many clinicians and researchers have wondered whether infants diagnosed as SUID harbor vulnerabilities which are the same or similar to those with a diagnosis of SIDS.

Researchers in the study abstracted above demonstrated that infants diagnosed with SUID do indeed harbor specific nerve cell defects within the medulla – a brain region critical to the regulation of breathing, heart rate, blood pressure and temperature control. This brain region is also vital to the integration of these same functions during arousal from sleep. Abnormalities in a related nerve cell network had previously been described among subsets of infants whose deaths were attributed to SIDS.<sup>1-2</sup> This study suggests that at least some SUID appear to harbor vulnerabilities similar to those previously described for SIDS. An implication of this study is a reminder that, within our efforts to reduce risk, the messages of "safe infant sleep practices" apply to all infants.

1. Paterson DS, Trachtenberg FL, Thompson EG, et al. Multiple serotonergic brainstem abnormalities in sudden infant death syndrome. *JAMA*. Nov 1, 2006;296(17):2124-32.

2. Duncan JR, Paterson DS, Hoffman JM, Mokler DJ, Borenstein NS, Belliveau RA, et al. Brainstem serotonergic deficiency in sudden infant death syndrome. *JAMA*. Feb 3 2010;303(5):430-7

# Around the Center

- **2011 OVERVIEW:** In 2011 the Center received 79 referrals statewide. 38 of these referrals were deaths attributed to SIDS (sudden infant death syndrome), SUID (sudden, unexpected infant death), undetermined or no anatomic cause. Forty-one referrals were sudden, unexpected deaths due to other causes, such as accidental asphyxia, suffocation, infection, congenital anomalies, accidents etc. Compromised sleep environment was a risk factor in many of the deaths referred to the Center. Fifteen percent (15%) of the 2011 referrals occurred in licensed childcare. Services were provided to approximately 115 families. Other activities included:

Distribution of information materials:.....	30,000
Education programs: .....	14
Media Interviews .....	10
Newsletter distribution: .....	3,500

**SUPPORT:** Metro area support group includes one meeting a month for parents, and special events through Children’s Hospitals and Clinics of Minnesota, such as handling the holidays, annual memorial service, Fall family day etc.

**EDUCATION:** Education programs reached newborn nursery staff, childcare providers, childcare licensing and referral agencies, public health nurses, and the community at large. Media interviews included television with FOX 9 news and multiple interviews with the Star Tribune.

**RESEARCH:** Trend data continues to be gathered and shared with the Minnesota Department of Health to support infant mortality risk reduction public health efforts. This data informs public health messages about safe infant sleep practices at home and guides safe infant sleep regulations in child care settings.

**PARTNERSHIPS:** It takes a village.... The Center works with many other agencies to promote care for bereaved families, to better understand causes of infant mortality and to develop strategies to reduce infant deaths. These partnerships include serving on the Minnesota Department of Human Services (DHS) state child mortality review panel appointed by the Commissioner of Human Services, the advisory committee to Minnesota Department of Health’s (MDH) Pregnancy Risk Assessment and Monitoring System (PRAMS) funded by Centers for Disease Control (CDC) which collects data on maternal attitudes and experiences before,

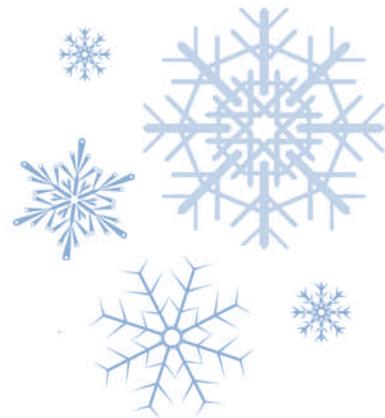
during, and shortly after pregnancy, the Hennepin County Safe Sleep Committee, and the CDC funded SUID subcommittee led by MDH and DHS to better understand the complex causes of sudden unexpected infant death.

Staff continues to work towards decreasing racial disparities in infant mortality and improving bereavement support in partnership with community and tribal health agencies. With this goal in mind, staff serves on the executive committee for Twin Cities Healthy Start, and is an active member of the American Indian infant mortality review project and the African American infant mortality review project.

- **IN THE NEWS:** Many readers have been following the recent Star Tribune articles about the increased number of infant deaths in licensed family child care. From 2002-2006, following the legislative mandate requiring risk reduction training for all licensed child care providers, we witnessed a dramatic decline in infant deaths in child care settings. However from 2007-2011 infant deaths in licensed family child care have begun trending upward again. The MN SID Center participated on a panel convened by the MN Department of Human Services to review deaths in child care in order to make recommendations for reversing this trend. The recommendations are presented in a report published in August 2012 and available on line at <https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4189F-ENG>. These recommendations will be

considered during the upcoming legislative session. The MN SID Center will continue to be a resource for child care training, curriculum development, and advocacy.

- Although the newsletter is now printed and mailed only once a year, the Center’s website is updated regularly and is another source of information and links to resources. Check it out at [www.childrensmn.org/sidcenter](http://www.childrensmn.org/sidcenter)



# A Visit From Grief on an Ordinary Day

By Amy Lyon

It's an ordinary day - don't most days start out that way? I browse the jeans rack wondering how it's possible that my little boy has grown so quickly - 4T, maybe even regular 4 or size 5.

It's Toddler Thursday - that blessed day when all kids' clothes are half price. I'll load up the cart and my son will be set for the long winter ahead.

I hear the bells above the door jingle. Someone has entered. My spine tingles. I pluck a pair of jeans off the rack. Oooh, perfect. This pair has those stretchy little elastic tabs for sizing. Wyatt's pants are always too big around his little waist. I drape them over the cart handle.

I move along and my fingers linger briefly on a pair of jeans with pink fringe around the bottoms. In that instant, I feel him come up behind me. *Not today. I have so many things to do. Please go away.*

I continue on to the next rack.

**Remember Toddler Thursday?** I press my eyes closed. He's here. *Of course I remember. I'll always remember.* I busy myself with my search. My fingertips graze an embroidered flower on the back pocket of a pair of girls' jeans. I never did understand why they mixed the boys and girls clothes together in this store. It doesn't make sense.

He laughs at my frustration, then he moves in so close that I can feel him breathing on my neck. But there's no fear. I know him too well to be afraid of him anymore. We spent endless days, sometimes weeks, together in the beginning without so much as a break. He even infiltrated my dreams.

I turn around to face him. *What are you doing here, Grief? It's just an ordinary day.* He smirks, knowing I know better than that. **Ordinary days are my favorite days. You know I like to arrive when I'm least expected.**

It's true. He rarely shows up on the days I'm prepared for him - birthdays, Heaven days and holidays. I move on to the rack of long-sleeve

shirts, and he moves along with me. He's practically touching my arm as he peers over my shoulder.

**I like that one.** He points to a hot pink shirt with a peace sign and daisies decorating the front. *Me too. I would have gotten that for her.* **And you probably would have had a matching shirt of your own. Maybe you'd call yourself twins and she'd giggle, hug you and say, 'I love you mommy'.**

I exhale sharply and shake my head. He's right. **Can you believe she would have been five this year?** I feel the tears prickle my eyelids, but they don't fall. Instead I think about the school clothes I would have bought for her - most likely in this store on a Toddler Thursday. An ordinary day. During her four months with us she wore many of the clothes I bought for her; others remain in a pink bin with the tags still attached.

**You look sad. Does it bother you that I'm here?** He cranes his neck so he can see my face. I shake my head. *No, it was harder in the beginning, but now I'm sort of used to you ... of course I could do without these random visits.*

He laughs and I move along the rack, selecting an orange and brown striped shirt. I don't attempt to ignore Grief anymore. That makes him feisty and he sticks around even longer, poking and prodding to get my attention.

I stop and turn to face him. *Actually, sometimes I like it when you come. The pain feels raw again and it feels like proof that she was really here. That she lived.*

He looks away. I turn back to the rack and I can feel his eyes on me. *I think I've learned how to deal with you. This is a lifelong journey and you'll be with me forever ... It doesn't have to be a bad thing, I guess. We can learn how to live with each other.*

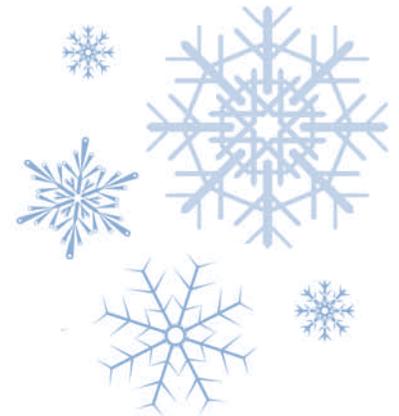
I wait for a smart remark, but he's quiet. I pick up a tan shirt with a dinosaur on the front. Wyatt will love this! I walk toward the checkout and Grief follows, a few steps behind me now.

"Hi there," I say to the clerk behind the counter. "How are you today?" Grief gives a little grunt then walks toward the door. He gets ornery when

he doesn't have my full attention. Out of the corner of my eye I see him give a little wave.

**See ya soon kiddo. Take care.** I turn quickly to look at him - was that compassion I heard in his voice? But it's too late, he's already outside on the sidewalk, strolling away - at least for today.

*Amy Lyon is the author of Only God Knows Why: A Mother's Memoir of Death and Rebirth. She lives in Prior Lake, Minnesota with her husband Chad, son Wyatt, and angel in Heaven, Isabelle. [www.amylyon.com](http://www.amylyon.com)*



# Funeral Assistance Available

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With the generous support of two families' fundraisers, the MN SID Center will soon be promoting our ability to provide funeral assistance to newly bereaved families. We will be able to provide up to \$500 to help with such things as burial assistance, headstones, flowers, transportation, clothing etc. Families need only contact the Center and provide the bill for direct payment to the vendor.

Donations from two fundraisers, one in memory of Ray Gregory Labat the other in memory of Noah Joseph Rogers, have been designated by their families to be used in this way to offer comfort to other newly bereaved families and to honor Ray and Noah.

## IN THEIR OWN WORDS...

**About RAY:** On a beautiful Fall day our little man, Ray Gregory Labat, joined our family. He was our first child and quickly became the light of our lives. He had a smile that would light up a room and was just starting to develop a personality all his own. A short time later, Ray passed away from SIDS at the age of 4 months and 10 days old.



Ray Gregory Labat

**About NOAH:** The day Noah was born was the happiest day of our lives. Our beautiful son and first born, Noah Joseph Rogers, came into this world. He had personality right from the start and was a true gift to our family. Sadly, we never knew that the greatest love of our life would be taken away from us at just 11 months old. Noah passed away from SIDS while taking a nap at daycare.



Noah Joseph Rogers

**Why the funeral fund:** We quickly learned how expensive it is to lose a child. Between funeral costs, head stones, ambulance bills and ER bills, money gets tight. It is not something you plan for and many simply don't have the funds. It's not something you want to stress about in your time of grief. With the help of the Minnesota Sudden Infant Death Center and Children's Hospital we have created the Ray Labat/Noah Rogers Memorial Funeral Fund to help assist families with costs after the loss of a child.

The fund stems from money raised at two family run events. The Labat/Peterson Family holds the annual Ray's Run ([www.raysrun.org](http://www.raysrun.org)) and the Rogers Family holds an annual golf tournament, Noah's Memorial Classic ([www.noahsmemorialclassic.org](http://www.noahsmemorialclassic.org)). We not only want to help assist other families financially after the loss of a child, but to also keep the memory of our boys alive. Please contact the Minnesota Sudden Infant Death Center for further information about this fund.

In order to grow this fund, we ask for your help. Join us on September 14, 2013 for the 3rd Annual Ray's Run and on July 29, 2013 at Medina Golf & Country Club for the 3rd Annual Noah's Memorial Classic.

Sincerely,

*Adam, Erin, Ray, and Jon Labat*

*Scott, Jenna, Noah and Oliver Rogers*

The Center's website is updated regularly and is another source of information. Check it out at [www.childrensmn.org/sidcenter](http://www.childrensmn.org/sidcenter)



# Consider a Holiday Donation!

Donations are an important part of our support. They allow us to reach out to newly bereaved parents, provide literature to families, relatives and professionals, print the newsletter, sponsor parent support groups, conduct educational programs and participate in research. Please consider a gift to the Minnesota SID Center in your annual charitable giving. As a non-profit organization, we rely heavily on the generosity of our friends. To make a donation, you can complete this form and return to the Center, go on line to donate at [www.childrens.mn.org/sidcenter](http://www.childrens.mn.org/sidcenter), or call us to request a donor envelope.

Thank you.

\_\_ \$50    \_\_ \$100    \_\_ \$50    \_\_ \$25    \_\_\_\_ Other

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Address \_\_\_\_\_

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*Please use my gift*

\_\_\_\_\_ In memory of \_\_\_\_\_

\_\_\_\_\_ In honor of \_\_\_\_\_

Occasion \_\_\_\_\_

*Please send acknowledgement to*

Name \_\_\_\_\_

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City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Checks can be made payable to MN SID Center and sent to:

MN SID Center  
Children's Hospitals and Clinics of MN,  
2525 Chicago Ave. So.  
Mail Stop 50-216S  
Minneapolis, MN 55404-4597

## Memorial Events - December 6 and December 9

...that their light may always shine...

Each year on **December 6th at 7:00 p.m.** a candlelight memorial is held at *Angel of Hope* statues around the country. The public is invited to attend this short, simple, secular ceremony and to join with others in remembering their children. The *Angel of Hope* is part of an international network of memorial parks that has become known as a place of hope and healing for anyone who has suffered the loss of a child.

**Minnesota is now home to several *Angel of Hope* parks** - Duluth, Fergus Falls, Grand Rapids, Maple Grove, Perham, Virginia, and Willmar. Contact the MN SID Center for more information about the December events at each site.

**Sunday, December 9th at 7:00 p.m.** marks the annual **Worldwide Candle Lighting** sponsored by Compassionate Friends. This annual observance unites family and friends around the globe as they light candles for one hour to honor and remember children who have died at any age from any cause. Candles are lit at 7 p.m. local time, creating a virtual wave of light around the world. Hundreds of formal candle lighting events are held and thousands of informal candle lightings are conducted in homes as families gather in quiet remembrance of children who have died, but will never be forgotten.

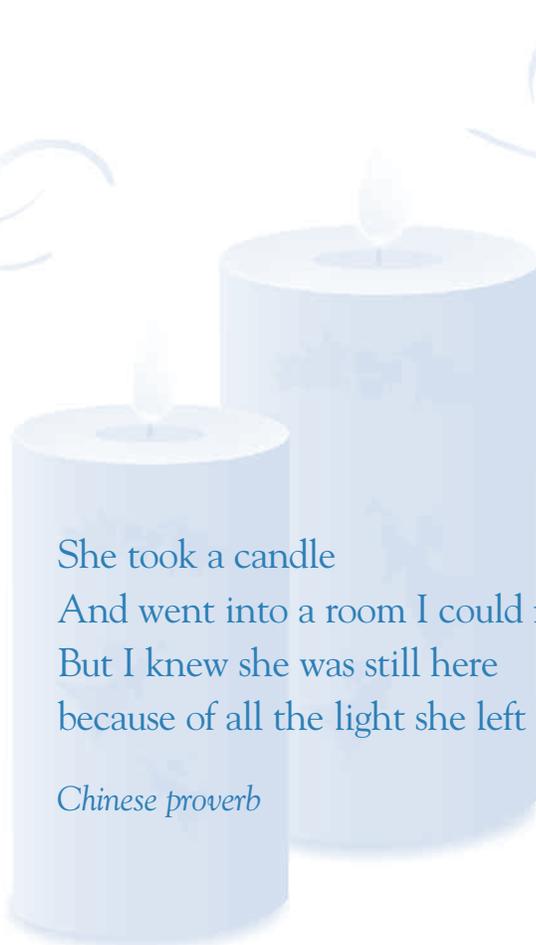
Family and friends are also invited to post a message in the Remembrance Book which will be available during the event on the Compassionate Friends USA national website at [www.compassionatefriends.org](http://www.compassionatefriends.org)

This year **Children's Hospitals and Clinics of Minnesota** will host a candle lighting event on the Minneapolis campus in conjunction with Compassionate Friends' Worldwide Candle Lighting. Children's event will take place outdoors in the Healing Garden on Chicago and 26th St. Contact the MN SID for more information.

### Dear Child of Mine

Dear Child of Mine, who died before your time,  
I am grateful for your life.  
Though death brought the end of hopes and dreams  
Still I am grateful for your life.  
Though you and I have known joy and sorrow,  
Laughter and tears, through you my life has been  
Enriched...  
I am grateful for your life.  
I have been blessed by your life and left with your love...  
Dear child of mine, though you died before your time, you are  
never far away from me. I have locked you in my secret heart  
of hearts and there I will love you through eternity.  
I am grateful for your life, dear child of mine...

*Betty Stevens, Bereaved Parent  
Compassionate Friends*



She took a candle  
And went into a room I could not find,  
But I knew she was still here  
because of all the light she left behind...

*Chinese proverb*

# Thank You

- To the **Pottinger Family** of Vermillion, MN – Dad Joey, Mom Suzanne and siblings Hailey and Hunter –for hosting the second annual bowling tournament - **2012 Lanes for Life** - in loving memory of daughter and sister **Lauren Marie Pottinger**. Bowling, pizza and more was held in April at the Island Extreme Bowl-Treasure Island Resort and Casino in Welch, MN. Almost \$3000 in proceeds was donated to the MN SID Center.

This year was a milestone for two long time donors to the MN SID Center. The Powers - Hinkel Family Golf Tournament marked it's 15th and final year. The Cody Lundgren SIDS Memorial Golf Tournament marked its 10th year.

- A special thank you to the **Powers and Hinkel families and friends** for sponsoring a memorable celebration of lives touched at Children's Hospitals and Clinics of Minnesota. An emotional 15th and final annual **Powers/Hinkel Memorial Golf Tournament** took place in July 2012. The event celebrated the lives of Sandra (Sauni) Powers and Casaundra (Cassie) Hinkel.

Over \$40,000 was raised at this year's event adding to the remarkable total of more than \$300,000 in proceeds over the life of the outing. Gifts from the tournament money created the *Sandra Powers and Casaundra Hinkel Endowed Fund* which will annually generate gifts equally supporting the Minnesota SID Center and the Cardiovascular Care Center at Children's Hospitals and Clinics of Minnesota.

- **The Lundgren family of Thief River Falls held the Tenth Annual Cody Lundgren SIDS Memorial Golf Tournament** at the Thief River Golf Club this past June 8. Family organizers - grandparents Mike and Shirley Lundgren, David and Karen Kirkeby, Cody's parents Charlie and Tami Lundgren and enthusiastic supporters, brothers Alex and Parker told us - "good weather, no major issues and feedback from participants made for one of our most enjoyable tournament experiences." The Lundgren family notes "that community involvement continues to be a big part in the success of the tournament. The winning team from Fargo, ND had made the four-hour round trip to Thief River for all ten years"! More than \$6000 in proceeds was donated to the Center in Cody's name, totaling almost \$60,000 in donations since the Tournament began.



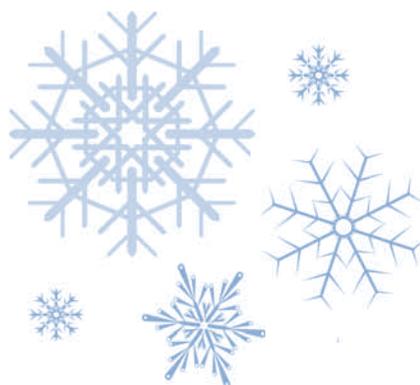
Brothers Alex (5) and Parker (9) Lundgren getting ready for the 2012 golf tournament



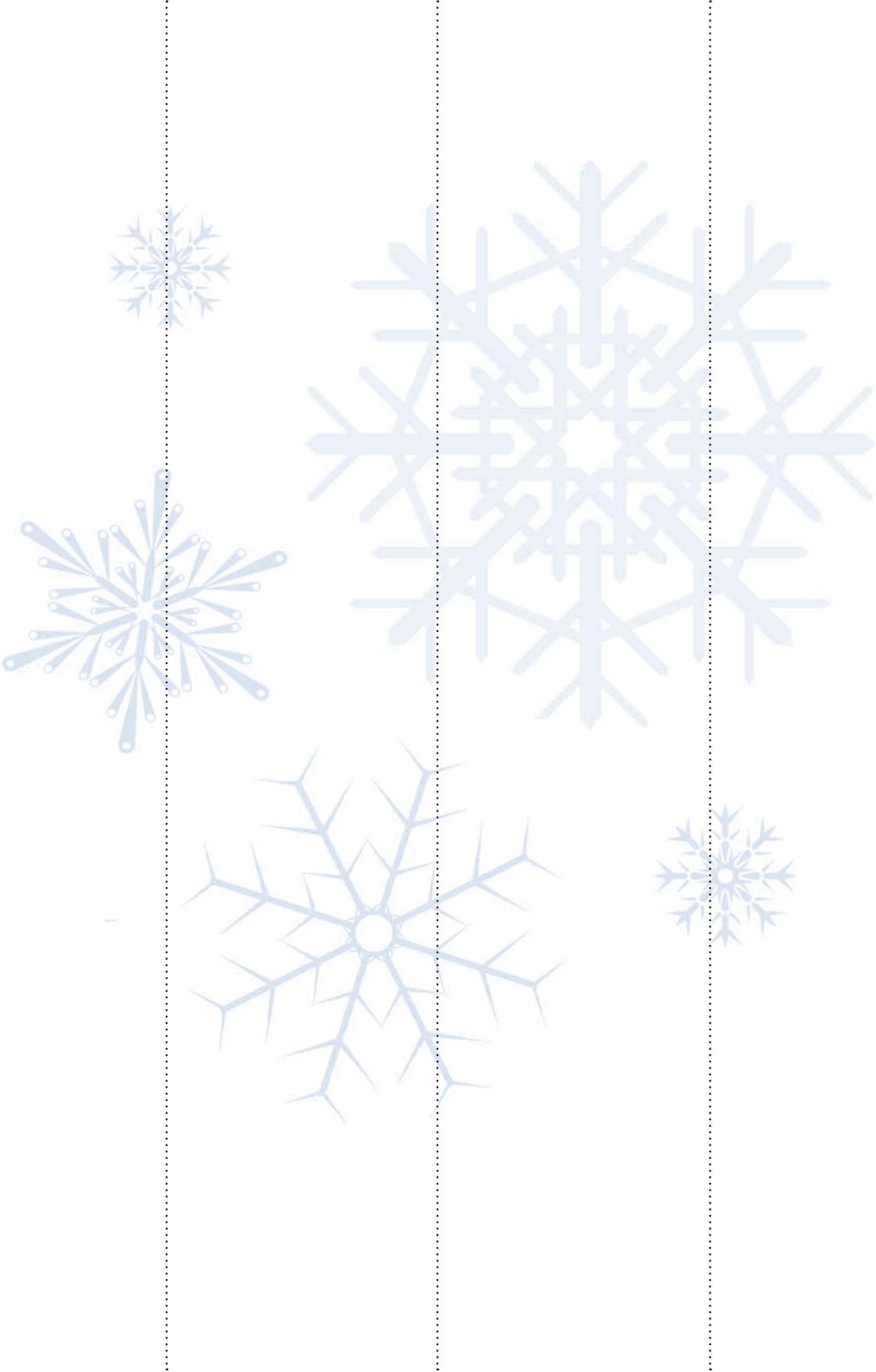
Members of the winning team from Fargo, ND who have played in the tournament for all 10 years! Dave Hirschorn, Dave Winkles, Craig Werks and Kevin Fraase

The Minnesota SID Center is honored to be the beneficiary of family fundraising events and friends' philanthropic giving. The proceeds enable the Center to continue its work to support families, educate communities, and participate in research.

Such events are labor intensive and demonstrate a depth of love and dedication. A special thank you to all those who organized them as well as to those who donated or participated in them for your generosity and support!



**Thank You...** The Minnesota Sudden Infant Death Center wishes to thank the following donors for their generous gifts given in the name of a special child or individual. These donations were received from November 2011 to November 15, 2012.



# Minnesota Sudden Infant Death Center

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Minneapolis, MN 55404

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## 2013 Newsletter Deadline October 15, 2013

We welcome letters, poems and pictures from parents, grandparents, relatives, childcare providers and friends. Because of space limitations, we must sometimes edit these submissions. The editors attempt to give as many parents as possible the opportunity to share memories of their children.

Check out SID  
Center website  
[www.childrensmn.org/sidcenter](http://www.childrensmn.org/sidcenter)

Want to share the newsletter? It's also available electronically on our website. With the newsletter being published once a year, we will be relying more heavily on our website to share information and updates with you. Check it out at [www.childrensmn.org/sidcenter](http://www.childrensmn.org/sidcenter).

The MN SID Center is a program of Children's Hospital and Clinics of Minnesota, funded in part by the MN Department of Health, Community and Family Health Division.

PLEASE NOTE: If you would like to have your name taken off the SID Center mailing list, notify the Center at (612) 813-6285 or 1-800-732-3812.

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