



# the risk of SIDS

## Placing infants to sleep on their back to reduce the risk of SIDS

### Why is this important?

In developed countries sudden infant death syndrome (SIDS) is the main cause of death for children under 12 months of age [1]. In Australia, in 2000, the incidence of SIDS was 52 per 100,000 live births, which represents a 62 per cent fall from the figures reported in 1991 [2]. This drop in incidence followed the 1991 National SIDS Council of Australia campaign 'Reducing the Risk', which advocated that infants not be placed in the stomach sleeping position [3]. Despite this significant public health achievement, the rate of SIDS in Australia could be more than halved through the complete avoidance of established risk factors [4].

SIDS rates amongst Aboriginal and Torres Strait Islander infants (253 per 100,000 live births) are now five times higher than the national average, and this discrepancy is increasing [2,4].

### Best available evidence

Current evidence suggests that the most significant risk factor for SIDS is the sleeping position – with stomach position infants at highest risk. In a cohort of 3,110 Tasmanian infants considered to be at high risk of SIDS, Dwyer et al. [5] showed that the risk of SIDS in infants sleeping in the stomach position was four and a half times that of infants sleeping in the back position. A meta-analysis of 19 retrospective case control studies showed an almost three-fold increased risk of SIDS associated with the stomach sleeping position [6].

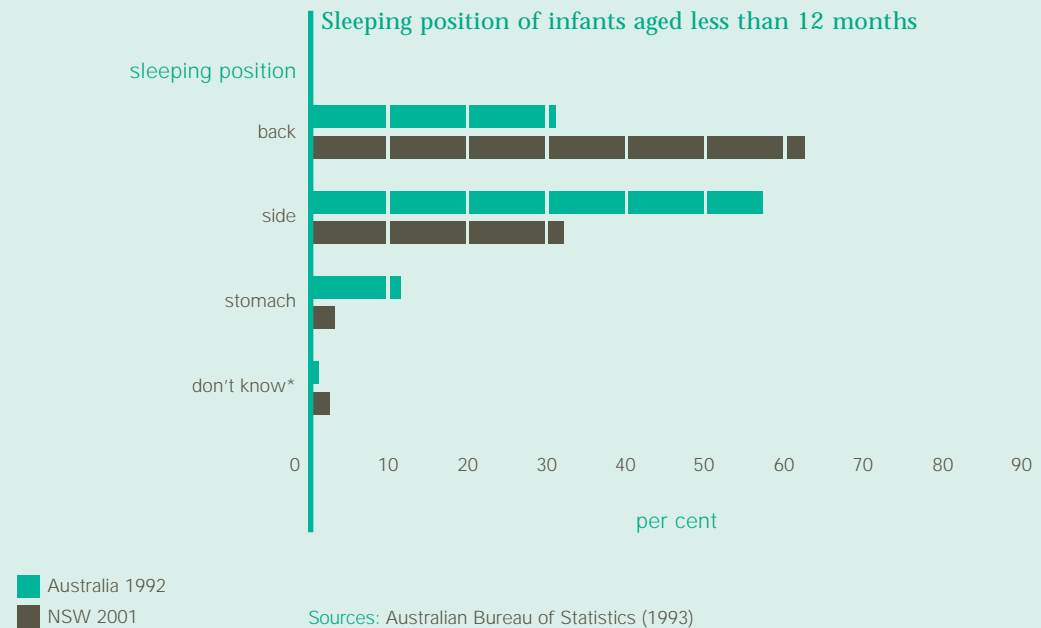
In March 1997, the National SIDS Council of Australia convened a multidisciplinary forum to review recent evidence and, where appropriate, revise the guidelines [7]. The review of the scientific literature identified that while avoidance of the stomach sleeping position was most important, putting infants in the back position produced greater protection from SIDS

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than the side position [8–12]. This same evidence underpins the suitably named ‘Back to Sleep’ campaign that is being run in the United States by the National Institute of Child Health and Human Development [13].

### Current practice

The most recent available data suggests that the majority of infants aged less than 12 months are placed to sleep on their back. This information comes from a state-wide survey in New South Wales in 2001 [14] which reported that only 3.2 per cent of infants were placed to sleep on their stomach, but that almost one-third were placed on their side. These figures are quite different from those of a larger national survey that was undertaken in 1992 [15]. Clearly, significant changes have taken place, with a doubling in the proportion of infants now placed on their backs to sleep.



Sources: Australian Bureau of Statistics (1993)  
NSW Dept of Health (2001)

\*Includes more than one position and ‘other’

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Several studies have examined the SIDS risk factors in Indigenous communities. In relation to sleeping position, results have been mixed, with estimates of sleeping on the stomach varying between 11 per cent [16], 20 per cent [17] and 37 per cent [18].

### Implications

The introduction of public awareness campaigns regarding the association between the stomach sleeping position and SIDS has had a dramatic influence in reducing the number of deaths in infants.

However, several gaps between the available evidence and current infant sleeping practices have been identified:

- While the majority of infants are being placed on their back to sleep, large proportions are still being placed on their side. There is a need for educational and public awareness campaigns to emphasise the safety of the back sleeping position rather than an avoidance of the stomach position. Here, obstetric services can play an important role in guiding parent behaviour.
- In Aboriginal and Torres Strait Islander communities, the incidence of SIDS remains five times higher than the national average.

The majority of Indigenous infants appear to be placed on their side to sleep. Therefore these communities require increased public awareness and education campaigns to emphasise not only the risks of stomach sleeping, but also the potential risks posed by side sleeping.

- Sleeping position is not the only risk factor related to the incidence of SIDS. Other factors involve interventions such as reducing parental smoking [19].
- The practice of co-sleeping, which is estimated to occur in the majority of Indigenous homes, has also been associated with an increased risk of SIDS, particularly in the context of parental smoking.



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