

# Search Results

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**1. Cot deaths.**

**Citation:** BMJ, January 1995, vol./is. 310/6971(7-10), 0959-8138;0959-535X (1995 Jan 7)

**Author(s):** anonymous

**Language:** English

**Country of Publication:** ENGLAND

**Publication Type:** News

**Subject Headings:** [France/ep \[Epidemiology\]](#)  
[Great Britain/ep \[Epidemiology\]](#)  
[\\*Health Promotion](#)  
[Hong Kong/ep \[Epidemiology\]](#)  
[Humans](#)  
[Infant](#)  
[Infant, Newborn](#)  
[Israel/ep \[Epidemiology\]](#)  
[New Zealand/ep \[Epidemiology\]](#)  
[\\*Sudden Infant Death/ep \[Epidemiology\]](#)  
[Sudden Infant Death/pc \[Prevention & Control\]](#)  
[United States/ep \[Epidemiology\]](#)

**Source:** MEDLINE

**Full Text:** Available in *fulltext* at [Highwire Press](#)  
 Available in *fulltext* at [National Library of Medicine](#)

**2. What do mothers remember about the 'back to sleep' campaign?.**

**Citation:** Archives of Disease in Childhood, December 1995, vol./is. 73/6(496-7), 0003-9888;1468-2044 (1995 Dec)

**Author(s):** Hiley CM; Morley C

**Institution:** Department of Paediatrics, Addenbrookes Hospital, Cambridge.

**Language:** English

**Abstract:** A campaign was launched by the Department of Health late in 1991 to advise mothers how to reduce the risk of cot death. OBJECTIVE--To investigate whether mothers remember receiving this advice, their sources of information, and the advice they were given. SETTING--Questionnaires filled in by mothers of babies born in three maternity units in East Anglia. METHOD--150 mothers of full term babies born throughout 1992 were enrolled. All of them should have received the information. They were sent a questionnaire when their baby was 6 months old. RESULTS--399 (89%) questionnaires were analysable. Sources of information were: television, 72%; magazines, 59%; midwives, 55%; health visitors, 48%; and doctors, 11%. 23% said they received no advice from a health professional about reducing the risk of cot death. Doctors, who had all been informed by the Department of Health, were surprisingly poor at passing on the information. Advice on sleeping position was remembered by 72%, overheating by 60%, and smoking by 35%. Problems in following the advice were reported by only 5% of mothers. CONCLUSIONS--The media was most influential in spreading the new advice. Basic infant care advice is not the preserve of doctors.

**Country of Publication:** ENGLAND

**Publication Type:** Journal Article; Research Support, Non-U.S. Gov't

**Subject Headings:** [Adolescent](#)  
[Adult](#)  
[Female](#)  
[Health Personnel](#)  
[\\*Health Promotion/mt \[Methods\]](#)  
[Humans](#)

[Infant](#)  
[\\*Infant Care](#)  
[Mass Media](#)  
[\\*Mental Recall](#)  
[\\*Mothers/px \[Psychology\]](#)  
[Questionnaires](#)  
[Risk Factors](#)  
[\\*Sudden Infant Death/pc \[Prevention & Control\]](#)

**Source:** MEDLINE

**Full Text:** Available in *fulltext* at [Highwire Press](#)  
 Available in *fulltext* at [Highwire Press](#)  
 Available in *fulltext* at [National Library of Medicine](#)

### 3. [Has the campaign for the prevention of sudden infant death been effective?]. [French] La campagne de prevention de la mort subite du nourrisson a-t-elle ete efficace?

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**Original Title:** La campagne de prevention de la mort subite du nourrisson a-t-elle ete efficace?  
**Citation:** Archives de Pediatrie, December 1995, vol./is. 2/12(1224), 0929-693X;0929-693X (1995 Dec)  
**Author(s):** Dehan M  
**Language:** French  
**Country of Publication:** FRANCE  
**Publication Type:** Letter  
**Subject Headings:** [France](#)  
[\\*Health Promotion](#)  
[Humans](#)  
[Infant](#)  
[\\*Sudden Infant Death/pc \[Prevention & Control\]](#)  
**Source:** MEDLINE

### 4. Prevalence of risk factors for SIDS.

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**Citation:** Journal of Paediatrics & Child Health, October 1996, vol./is. 32/5(469-70), 1034-4810;1034-4810 (1996 Oct)  
**Author(s):** Callaghan A; Read A; Richardson G  
**Language:** English  
**Country of Publication:** AUSTRALIA  
**Publication Type:** Letter  
**Subject Headings:** [Chi-Square Distribution](#)  
[Confidence Intervals](#)  
[Data Collection](#)  
[\\*Health Promotion/sn \[Statistics & Numerical Data\]](#)  
[Humans](#)  
[Infant](#)  
[Odds Ratio](#)  
[Prone Position](#)  
[Risk Factors](#)  
[Sudden Infant Death/ep \[Epidemiology\]](#)  
[\\*Sudden Infant Death/pc \[Prevention & Control\]](#)  
[Western Australia/ep \[Epidemiology\]](#)  
**Source:** MEDLINE

### 5. Risk factors for sudden infant death syndrome following the prevention campaign in New Zealand: a prospective study.

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**Citation:** Pediatrics, November 1997, vol./is. 100/5(835-40), 0031-4005;1098-4275 (1997 Nov)

**Author(s):** Mitchell EA; Tuohy PG; Brunt JM; Thompson JM; Clements MS; Stewart AW; Ford RP; Taylor BJ

**Institution:** Department of Paediatrics, University of Auckland, Auckland, New Zealand.

**Language:** English

**Abstract:** OBJECTIVES: To identify the risk factors for sudden infant death syndrome (SIDS) following a national campaign to prevent SIDS. METHODS: For 2 years (October 1, 1991 through September 30, 1993) data were collected by community child health nurses on all infants born in New Zealand at initial contact and at 2 months. RESULTS: There were 232 SIDS cases in the postneonatal age group (2.0/1000 live births) and these were compared with 1200 randomly selected control subjects. Information was available for 127 cases (54.7%) and 922 (76.8%) of controls. The previously identified modifiable risk factors were examined. The prevalence of prone sleeping position of the infant was very low (0.7% at initial contact and 3. 0% at 2 months), but was still associated with an increased risk of SIDS. In addition, the side sleeping position was also found to have an increased risk of SIDS compared with the supine sleeping position (at 2 months: adjusted odds ratio (OR) = 6.57; 95% confidence interval (CI) = 1.71, 25.23). Maternal smoking was found to be the major risk factor for SIDS. Bed sharing was also associated with an increased risk of SIDS. There was an interaction between maternal smoking and bed sharing on the risk of SIDS. Compared with infants not exposed to either bed sharing or maternal smoking, the adjusted OR for infants of mothers who smoked was 5.01 (95% CI = 2.01, 12.46) for bed sharing at the initial contact and 5.02 (95% CI = 1.05, 24. 05) for bed sharing at 2 months. In this study breastfeeding was not associated with a statistically significant reduction in the risk of SIDS. The other risk factors for SIDS identified were: unmarried mother, leaving school at a younger age, young mother, greater number of previous pregnancies, late attendance for antenatal care, smoking in pregnancy, male infant, Maori ethnicity, low birth weight, and shorter gestation. CONCLUSIONS: After adjustment for potential confounders, prone and side sleeping positions, maternal smoking, and the joint exposure to bed sharing and maternal smoking were associated with statistically significant increased risk of SIDS. A change from the side to the supine sleeping position could result in a substantial reduction in SIDS. Maternal smoking is common in New Zealand and with the reduction in the prevalence of prone sleeping position is now the major risk factor in this country. However, smoking behavior has been difficult to change. Bed sharing is also a major factor but appears only to be a risk to infants of mothers who smoke. Addressing bed sharing among mothers who smoke could reduce SIDS by at least one third. Breastfeeding did not appear to offer a statistically significant reduction in SIDS risk after adjustment of potential confounders, but as breastfeeding rates are comparatively good in New Zealand, this result should be interpreted with caution as the power of this study to detect a benefit is small.

**Country of Publication:** UNITED STATES

**CAS Registry Number:** 0 (Tobacco Smoke Pollution)

**Publication Type:** Journal Article; Research Support, Non-U.S. Gov't

**Subject Headings:** [Beds](#)  
[Bottle Feeding/ae \[Adverse Effects\]](#)  
[Case-Control Studies](#)  
[Female](#)  
[\\*Health Promotion](#)  
[Humans](#)  
[Infant](#)  
[Male](#)  
[Mothers](#)  
[New Zealand](#)  
[Primary Prevention](#)  
[Prone Position](#)  
[Prospective Studies](#)  
[Risk Factors](#)

Sleep  
 Sudden Infant Death/ep [Epidemiology]  
 \*Sudden Infant Death/et [Etiology]  
 Tobacco Smoke Pollution/ae [Adverse Effects]

**Source:** MEDLINE

## 6. 'Back to sleep': the position in Oxfordshire and Northampton.

**Citation:** Paediatric and Perinatal Epidemiology, April 1998, vol./is. 12/2(217-27), 0269-5022;0269-5022 (1998 Apr)

**Author(s):** Rose M; Murphy M; Macfarlane JA; Sefi S; Shribman S; Hales V

**Institution:** Community Paediatric Department, Churchill Hospital, Oxford, UK.

**Language:** English

**Abstract:** We examined hospital and domestic infant care practices in Oxfordshire and Northampton Health Districts to measure changes in prevalence of sudden infant death syndrome (SIDS) risk factors, and to evaluate a specific educational intervention restricted to Oxfordshire. We sent a postal questionnaire to 2781 parents of babies newly born in January 1992, July 1992 and January 1993 and achieved an 88% response rate. Overall, in hospital a relatively constant proportion (81%) slept on their sides and few prone, whereas at home 52% (but increasing) slept supine and 8% prone part or all of the time. Significant differences existed by district, both in hospital and at home, with more sleeping supine in Oxfordshire and more side-sleeping/propping in Northampton. First-time parents were more receptive to safety guidelines about sleeping position and several other risk factors also. We detected no modifying effect of the Oxfordshire advice. Professional practice can influence parental behaviour but general media coverage may produce the biggest effects.

**Country of Publication:** ENGLAND

**Publication Type:** Journal Article; Research Support, Non-U.S. Gov't

**Subject Headings:** Bedding and Linens  
 Chi-Square Distribution  
 England/ep [Epidemiology]  
 Guidelines as Topic  
 Health Care Surveys  
 Health Knowledge, Attitudes, Practice  
 \*Health Promotion/mt [Methods]  
 Hospitals/sn [Statistics & Numerical Data]  
 Humans  
 Infant  
 \*Infant Care/st [Standards]  
 Linear Models  
 Prone Position/ph [Physiology]  
 Sleep/ph [Physiology]  
 Sudden Infant Death/ep [Epidemiology]  
 \*Sudden Infant Death/pc [Prevention & Control]  
 Temperature

**Source:** MEDLINE

## 7. [Ethnic origin and care giving styles relevant to cot death]. [Dutch] Etnische afkomst en voor wiegendood relevante verzorgingsfactoren.

**Original Title:** Etnische afkomst en voor wiegendood relevante verzorgingsfactoren.

**Citation:** Nederlands Tijdschrift voor Geneeskunde, October 1999, vol./is. 143/43(2141-6), 0028-2162;0028-2162 (1999 Oct 23)

**Author(s):** van der Wal MF; de Jonge GA; Pauw-Plomp H

**Institution:** Afd. Epidemiologie, Documentatie en Gezondheidsbevordering, GG&GD, Amsterdam.

<b>Language:</b>	Dutch
<b>Abstract:</b>	<p>OBJECTIVE: To examine whether ethnic origin is related to care giving styles relevant to sudden infant death. DESIGN: Prospective/retrospective, descriptive. METHOD: In six child health care centres in Amsterdam, the Netherlands, data about sleep position, bedclothes and passive smoking of infants aged 1-5 months were collected by face-to-face interviews of mothers visiting these centres between February 1997 and October 1998. RESULTS: Eligible for the study were 1815 infants, 919 boys and 896 girls, mean age 2 months. In Amsterdam 12.5% of infants were usually or sometimes put to sleep in a prone position, 31.0% usually or now and then in a side position (but not in a prone position) and 56.5% usually in a supine position. Prone sleeping position was more frequent among Surinamese infants and less frequent among Moroccan infants compared with Dutch infants. Overall use of a duvet among infants was 22.7%. Use of duvets was higher among allochtonous infants; after controlling for demographic factors this difference was not significant, however. 6.3% of the infants had slept in the previous night with a pillow. Use of a pillow was much more frequent among allochtonous than among autochtonous infants: 13% versus 1.2%. Maternal daily smoking during pregnancy and daily smoking by mothers or others at home at time of interview was found in 15.1% and 25.8% of the infants respectively. Almost no Moroccan mothers smoked during pregnancy (0.4%), while Turkish mothers smoked as much as Dutch mothers (18.5% and 21.6% respectively). No differences in daily smoking at home were found between Surinamese, Moroccan and Dutch families (circa 26%). However, daily smoking at home was much more frequent in Turkish families (43.8%). CONCLUSION: Health education about a safe sleeping position, about safe bedclothes and about the dangers of passive smoking is still needed. Education programmes to prevent sudden infant death must take into account ethnic differences in care giving styles. Special attention must be paid to the use of a pillow among allochtonous infants.</p>
<b>Country of Publication:</b>	NETHERLANDS
<b>CAS Registry Number:</b>	0 (Tobacco Smoke Pollution)
<b>Publication Type:</b>	English Abstract; Journal Article
<b>Subject Headings:</b>	<p>Adult  Cross-Cultural Comparison  Ethnic Groups/ed [Education]  Female  *Health Promotion  Humans  Infant  *Infant Care/mt [Methods]  Male  Morocco/eh [Ethnology]  Netherlands  Pregnancy  Prone Position  Prospective Studies  Retrospective Studies  Sleep  *Sudden Infant Death/eh [Ethnology]  *Sudden Infant Death/pc [Prevention &amp; Control]  Suriname/eh [Ethnology]  Tobacco Smoke Pollution  Turkey/eh [Ethnology]</p>
<b>Source:</b>	MEDLINE
<b>8. Risk factors for SIDS as targets for public health campaigns.</b>	
<b>Citation:</b>	Journal of Pediatrics, December 2001, vol./is. 139/6(759-61), 0022-3476;0022-3476 (2001 Dec)
<b>Author(s):</b>	Brouillette RT; Nixon G

**Language:** English

**Country of Publication:** United States

**Publication Type:** Comment; Editorial

**Subject Headings:** [\\*Health Promotion](#)  
[Humans](#)  
[Infant, Newborn](#)  
[\\*Public Health](#)  
[Risk Factors](#)  
[\\*Sudden Infant Death/et \[Etiology\]](#)

**Source:** MEDLINE

#### 9. Study on social responses (encouraging public awareness) to sudden infant death syndrome: evaluation of SIDS prevention campaigns.

**Citation:** Forensic Science International, September 2002, vol./is. 130 Suppl/(S78-80), 0379-0738;0379-0738 (2002 Sep 14)

**Author(s):** Sawaguchi T; Nishida H; Fukui F; Horiuchi T; Nelson E

**Institution:** Department of Legal Medicine, Tokyo Women's Medical University School of Medicine, 8-1 Kawada-cho, Shinjuku, Tokyo 162-8666, Japan. tsawagu@research.twmu.ac.jp

**Language:** English

**Abstract:** The sudden infant death syndrome (SIDS) prevention campaign promulgated by the SIDS Family Associations was initiated and directed to medical professionals in 1996 and to mothers in 1997. In mid-1998, the Ministry of Health and Welfare began to support this campaign. In parallel with these moves and with cooperation from the study group of the Ministry of Health and Welfare and the SIDS Family Associations of Japan, a Japanese segment of the International Child Care Practices Survey (ICCPS) was conducted in two phases--from 1996 to 1997 and from 1998 to 1999--to observe the trends in risk factors for SIDS that may exist in the child rearing environment in Japan. Consequently, after the SIDS prevention campaign, the risk factors for SIDS, such as the practice of placing infants in a prone posture, smoking, and formula feeding, were reduced. Correspondingly, it was shown that the incidence of SIDS in Japan and in Kanagawa Prefecture where the survey was carried out considerably decreased (0.42-0.24 per 1000 live births). These data indicate that this prevention campaign has been effective.

**Country of Publication:** Ireland

**Publication Type:** Journal Article

**Subject Headings:** [Health Education/mt \[Methods\]](#)  
[\\*Health Knowledge, Attitudes, Practice](#)  
[\\*Health Promotion/mt \[Methods\]](#)  
[Humans](#)  
[Incidence](#)  
[Infant](#)  
[Infant Mortality/td \[Trends\]](#)  
[Japan/ep \[Epidemiology\]](#)  
[National Health Programs](#)  
[Questionnaires](#)  
[Risk Factors](#)  
[\\*Sudden Infant Death/pc \[Prevention & Control\]](#)

**Source:** MEDLINE

#### 10. Back to sleep: risk factors for SIDS as targets for public health campaigns.

**Citation:** Journal of Pediatrics, April 2003, vol./is. 142/4(453-4), 0022-3476;0022-3476 (2003 Apr)

**Author(s):** Pastore G; Guala A; Zaffaroni M

**Language:** English

**Country of Publication:** United States

**Publication Type:** Comment; Letter

**Subject Headings:** [\\*Health Promotion](#)  
[Humans](#)  
[Infant](#)  
[\\*Prone Position](#)  
[\\*Public Health](#)  
[Risk Factors](#)  
[\\*Sudden Infant Death/et \[Etiology\]](#)  
[\\*Sudden Infant Death/pc \[Prevention & Control\]](#)

**Source:** MEDLINE

#### 11. First sudden infant death awareness campaign launched in South Africa.

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**Citation:** South African Medical Journal. Suid-Afrikaanse Tydskrif Vir Geneeskunde, November 2003, vol./is. 93/11(820-1), 0256-9574;0256-9574 (2003 Nov)

**Author(s):** anonymous

**Language:** English

**Country of Publication:** South Africa

**Publication Type:** News

**Subject Headings:** [\\*Awareness](#)  
[Great Britain/ep \[Epidemiology\]](#)  
[\\*Health Promotion](#)  
[Humans](#)  
[Infant](#)  
[Infant Welfare](#)  
[Infant, Newborn](#)  
[South Africa/ep \[Epidemiology\]](#)  
[Sudden Infant Death/ep \[Epidemiology\]](#)  
[Sudden Infant Death/et \[Etiology\]](#)  
[\\*Sudden Infant Death](#)  
[United States/ep \[Epidemiology\]](#)

**Source:** MEDLINE

#### 12. Reawakening awareness.

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**Citation:** Nursing Standard, November 2003, vol./is. 18/8(22), 0029-6570;0029-6570 (2003 Nov 5-11)

**Author(s):** Truman P

**Language:** English

**Country of Publication:** England

**Publication Type:** Journal Article

**Subject Headings:** [Great Britain/ep \[Epidemiology\]](#)  
[\\*Health Promotion/mt \[Methods\]](#)  
[Humans](#)  
[Infant Care/td \[Trends\]](#)  
[Infant, Newborn](#)  
[\\*Parents/ed \[Education\]](#)  
[Risk Factors](#)  
[Sudden Infant Death/ep \[Epidemiology\]](#)  
[\\*Sudden Infant Death/pc \[Prevention & Control\]](#)

**Source:** MEDLINE

**Full Text:** Available in *fulltext* at [ProQuest](#)



**13. A reassessment of the SIDS Back to Sleep Campaign.**

<b>Citation:</b>	Thescientificworldjournal, July 2005, vol./is. 5/(550-7), 1537-744X;1537-744X (2005 Jul 21)
<b>Author(s):</b>	Pelligra R; Doman G; Leisman G
<b>Institution:</b>	Ames Research Center, National Aeronautics and Space Administration, Moffett Field, CA 94035, USA. Ralph.Pelligra-1@nasa.gov
<b>Language:</b>	English
<b>Abstract:</b>	The Back to Sleep Campaign was initiated in 1994 to implement the American Academy of Pediatrics' (AAP) recommendation that infants be placed in the nonprone sleeping position to reduce the risk of the Sudden Infant Death Syndrome (SIDS). This paper offers a challenge to the Back to Sleep Campaign (BTSC) from two perspectives: (1) the questionable validity of SIDS mortality and risk statistics, and (2) the BTSC as human experimentation rather than as confirmed preventive therapy. The principal argument that initiated the BTSC and that continues to justify its existence is the observed parallel declines in the number of infants placed in the prone sleeping position and the number of reported SIDS deaths. We are compelled to challenge both the implied causal relationship between these observations and the SIDS mortality statistics themselves.
<b>Country of Publication:</b>	England
<b>Publication Type:</b>	Evaluation Studies; Journal Article
<b>Subject Headings:</b>	<a href="#">Developmental Disabilities/ep [Epidemiology]</a> <a href="#">Developmental Disabilities/et [Etiology]</a> <a href="#">Female</a> <a href="#">*Health Promotion/og [Organization &amp; Administration]</a> <a href="#">Human Experimentation</a> <a href="#">Humans</a> <a href="#">Infant</a> <a href="#">Infant, Newborn</a> <a href="#">Male</a> <a href="#">Mortality/td [Trends]</a> <a href="#">Pediatrics</a> <a href="#">Plagiocephaly, Nonsynostotic/ep [Epidemiology]</a> <a href="#">*Plagiocephaly, Nonsynostotic/et [Etiology]</a> <a href="#">Reproducibility of Results</a> <a href="#">Risk</a> <a href="#">Risk Assessment</a> <a href="#">Sleep</a> <a href="#">Societies, Medical</a> <a href="#">Sudden Infant Death/di [Diagnosis]</a> <a href="#">Sudden Infant Death/ep [Epidemiology]</a> <a href="#">*Sudden Infant Death/pc [Prevention &amp; Control]</a> <a href="#">*Supine Position</a> <a href="#">United States</a>
<b>Source:</b>	MEDLINE

**14. [Sleeping in the supine position in the ASL 11 region of Piemonte. Assessment of the efficacy of a promotional campaign]. [Italian] Dormire sulla schiena nell'asl 11--regione Piemonte Valutazione dell'efficacia di una campagna promozionale.**

<b>Original Title:</b>	Dormire sulla schiena nell'asl 11--regione Piemonte Valutazione dell'efficacia di una campagna promozionale.
<b>Citation:</b>	Pediatria Medica e Chirurgica, November 2005, vol./is. 27/6(29-33), 0391-5387;0391-5387 (2005 Nov-Dec)
<b>Author(s):</b>	Guala A; Guarino R; Campra D; Zaffaroni M; Pastore G; Lingua S; Bragazzi P; Gruppo di Lavoro SISP 11

**Institution:** SOC di Pediatria, Ospedale SS P tro e Paolo, Borgosesia, ASL 11.  
pediatria.borgosesia@asl11.piemonte.it

**Language:** Italian

**Abstract:** OBJECTIVES: To record the prevalence of the sleeping position of sucklings living in the ASL 11-Regione Piemonte; to make an information campaign about the utility of sleeping in the supine position (most important protection factor against the SIDS); to find out its efficacy for a short or long time. METHODS: During the first two months of 2002 all the parents coming to the consulting rooms for the compulsory vaccinations of their 3 and 5 months old babies have been interviewed about the position of their babies during sleep. The same recording has been made in the first two months of 2003 and 2004. During 2002 various consciousness campaigns have been made, above all for medical operators of hospital nurseries and of Mother-and-Child Departments and Prevention Departments in ASL 11 area. RESULTS: Before the consciousness campaign the percentage of 3 months old sucklings sleeping in the supine position was 62,3% and 55% for the 5 months old sucklings; after the campaign the percentage has grown to 77,4% for 3 months old sucklings and 74,5% for 5 months old sucklings during 2003 and during 2004 the percentage has grown to 80,3% and 74,2%, respectively. CONCLUSIONS: A simple and not expensive but capillary consciousness and information campaign addressed to medical operators has obtained valid and statistically relevant results in a short time.

**Country of Publication:** Italy

**Publication Type:** English Abstract; Journal Article

**Subject Headings:** [\\*Health Promotion](#)  
[Humans](#)  
[Infant](#)  
[Infant, Newborn](#)  
[Italy](#)  
[\\*Posture](#)  
[\\*Program Evaluation](#)  
[\\*Sudden Infant Death/pc \[Prevention & Control\]](#)

**Source:** MEDLINE

#### 15. Widening social inequalities in risk for sudden infant death syndrome.

**Citation:** American Journal of Public Health, November 2005, vol./is. 95/11(1976-81), 0090-0036;0090-0036 (2005 Nov)

**Author(s):** Pickett KE; Luo Y; Lauderdale DS

**Institution:** Department of Health Sciences, Seebom Rowntree Building, Area 3, University of York, Heslington, York, Y010 5DD, England. kp6@york.ac.uk

**Language:** English

**Abstract:** OBJECTIVES: In 1994, the US Public Health Service launched the "Back to Sleep" campaign, promoting the supine sleep position to prevent sudden infant death syndrome (SIDS). Studies of SIDS in the United States have generally found socioeconomic and race disparities. Our objective was to see whether the "Back to Sleep" campaign, which involves an effective, easy, and free intervention, has reduced social class inequalities in SIDS. METHODS: We conducted a population-based case-cohort study during 2 periods, 1989 to 1991 and 1996 to 1998, using the US Linked Birth/Infant Death Data Sets. Case group was infants who died of SIDS in infancy (N = 21 126); control group was a 10% random sample of infants who lived through the first year and all infants who died of other causes (N=2241218). Social class was measured by mother's education level. RESULTS: There was no evidence that inequalities in SIDS were reduced after the Back to Sleep campaign. In fact, odds ratios for SIDS associated with lower social class increased between 1989-1991 and 1996-1998. The race disparity in SIDS increased after the Back to Sleep campaign. CONCLUSIONS: The introduction of an inexpensive, easy, public health intervention has not reduced social inequalities in SIDS; in fact, the gap has widened. Although the risk of SIDS has been reduced for all social class groups, women who are more educated have experienced the greatest decline.

**Country of Publication:** United States

**Publication Type:** Journal Article

**Subject Headings:** [Adult](#)  
[Educational Status](#)  
[\\*Health Promotion/mt \[Methods\]](#)  
[Humans](#)  
[Infant, Newborn](#)  
[Marital Status](#)  
[Mothers](#)  
[Risk](#)  
[Risk Factors](#)  
[Smoking/ae \[Adverse Effects\]](#)  
[Smoking/eh \[Ethnology\]](#)  
[Socioeconomic Factors](#)  
[\\*Sudden Infant Death/ep \[Epidemiology\]](#)  
[Sudden Infant Death/eh \[Ethnology\]](#)

**Source:** MEDLINE

**Full Text:** Available in *fulltext* at [Highwire Press](#)  
Available in *fulltext* at [EBSCO Host](#)  
Available in *fulltext* at [EBSCO Host](#)  
Available in *fulltext* at [ProQuest](#)

#### 16. State child care regulations regarding infant sleep environment since the Healthy Child Care America-Back to Sleep campaign.

**Citation:** Pediatrics, 01 July 2006, vol./is. 118/1(73-83), 00314005

**Author(s):** Moon RY; Kotch L; Aird L

**Language:** English

**Abstract:** BACKGROUND: Despite overall decreases in sudden infant death syndrome deaths and prone sleeping, the proportion of sudden infant death syndrome deaths that occurs in child care settings has remained constant at approximately 20%. In 2003, the American Academy of Pediatrics' Healthy Child Care America program launched its own Back to Sleep campaign to promote the Back to Sleep message for those who care for young children. OBJECTIVES: The purpose of this study was to evaluate the effectiveness of the first 2 years of the Healthy Child Care America-Back to Sleep campaign in improving child care regulations by assessing the inclusion of the elements of a safe sleep environment in the individual state regulations for child care centers and family child care homes. METHODS: We examined regulations available in October 2005 for licensed child care centers and family child care homes in the 50 states and the District of Columbia for specific regulations pertaining to (1) sudden infant death syndrome risk-reduction training for child care providers, (2) infant sleep position, (3) crib safety, (4) bedding safety, (5) smoking, and (6) provision of information about sleep positioning policies and arrangements to parents before the infant is enrolled in child care. RESULTS: Since 2003, when the Healthy Child Care America-Back to Sleep campaign began, 60 of the 101 state regulations for either child care centers or FCCHs have been revised. More than half of these regulations written since 2003 mandate a nonprone sleep position and restrictions on soft bedding in the crib, and the change in these regulations since 2003 is statistically significant. However, of the 101 existing state regulations, only 49 require that infants sleep nonprone, 18 mandate sudden infant death syndrome training for child care providers, 81 have  $\geq 1$  crib safety standard, and 43 restrict soft bedding in the crib. Only 4 regulations require that parents be provided with sleep policy information. CONCLUSIONS: The initial 2 years of the Healthy Child Care America Back to Sleep campaign have been successful in promoting safe infant sleep regulations. Efforts must continue so that safe sleep regulations exist in all jurisdictions.

**Publication Type:** journal article

**Subject Headings:** [Health Promotion](#)

[Infant Care](#)  
[Sleep](#)  
[Sudden Infant Death](#)  
[Bedding and Linens](#)  
[Government](#)  
[Infant](#)  
[Infant Equipment](#)  
[Smoking](#)  
[Supine Position](#)  
[United States](#)  
[Human](#)

**Source:** CINAHL  
**Full Text:** Available in *fulltext* at [Highwire Press](#)

#### 17. Recommendations for sudden infant death syndrome prevention: a discussion document.

**Citation:** Archives of Disease in Childhood, February 2007, vol./is. 92/2(155-9), 0003-9888;1468-2044 (2007 Feb)  
**Author(s):** Mitchell EA  
**Institution:** Department of Paediatrics, University of Auckland, Private Bag 92019, Auckland, New Zealand. e.mitchell@auckland.ac.nz  
**Language:** English  
**Abstract:** This article reviews the evidence for the current UK Department of Health recommendations for prevention of sudden infant death syndrome (SIDS) and suggests other factors that should be considered. The wording of the Department of Health recommendations for SIDS prevention has changed over the past 6 years, but the specific recommendations are largely consistent with the scientific evidence. The emphasis on thermal and illness factors and immunisation could be reduced. Bed sharing and sharing the parental bedroom should be given more emphasis. Two major recommendations need to be discussed in greater detail: (1) breast feeding and (2) pacifier use. Meta-analyses or reviews looking at each risk factor or a combination of risk factors are required. Further, it is recommended that a committee is established that reviews the recommendations and publishes the evidence that leads to these recommendations, as is done by the American Academy of Pediatrics Taskforce on Sudden Infant Death Syndrome.  
**Country of Publication:** England  
**Publication Type:** Journal Article; Research Support, Non-U.S. Gov't; Review  
**Subject Headings:** [Breast Feeding](#)  
[Education/mt \[Methods\]](#)  
[Evidence-Based Medicine/mt \[Methods\]](#)  
[Female](#)  
[\\*Health Promotion/mt \[Methods\]](#)  
[Humans](#)  
[Infant](#)  
[\\*Infant Care/mt \[Methods\]](#)  
[Maternal-Fetal Exchange](#)  
[Pacifiers](#)  
[Pregnancy](#)  
[Prone Position](#)  
[Risk Factors](#)  
[Sleep](#)  
[Smoking](#)  
[Sudden Infant Death/et \[Etiology\]](#)  
[\\*Sudden Infant Death/pc \[Prevention & Control\]](#)  
**Source:** MEDLINE  
**Full Text:** Available in *fulltext* at [Highwire Press](#)  
 Available in *fulltext* at [ProQuest](#)

Available in *fulltext* at [National Library of Medicine](#)

#### 18. Cribs for Kids: risk and reduction of sudden infant death syndrome and accidental suffocation.

**Citation:** Health & Social Work, August 2007, vol./is. 32/3(225-9), 0360-7283;0360-7283 (2007 Aug)

**Author(s):** Carlins EM; Collins KS

**Institution:** S.I.D.S. of Pennsylvania, Pittsburg 15212, USA. [ecarlins@SIDS-PA.org](mailto:ecarlins@SIDS-PA.org)

**Language:** English

**Country of Publication:** United States

**Publication Type:** Journal Article

**Subject Headings:** [\\*Asphyxia/pc \[Prevention & Control\]](#)  
[\\*Bedding and Linens](#)  
[\\*Health Promotion/og \[Organization & Administration\]](#)  
[Humans](#)  
[Infant](#)  
[Infant, Newborn](#)  
[Policy Making](#)  
[Program Development](#)  
[Program Evaluation](#)  
[\\*Risk Reduction Behavior](#)  
[Sudden Infant Death/ep \[Epidemiology\]](#)  
[\\*Sudden Infant Death/pc \[Prevention & Control\]](#)  
[United States/ep \[Epidemiology\]](#)

**Source:** MEDLINE

**Full Text:** Available in *fulltext* at [EBSCO Host](#)  
 Available in *fulltext* at [EBSCO Host](#)  
 Available in *fulltext* at [ProQuest](#)

#### 19. [Prevention of sudden infant death: a Bavarian campaign]. [German] Pravention des plotzlichen Sauglingstodes: Eine Bayernweite Kampagne.

**Original Title:** Pravention des plotzlichen Sauglingstodes: Eine Bayernweite Kampagne.

**Citation:** Gesundheitswesen, March 2008, vol./is. 70 Suppl 1/(S29-33), 0941-3790;1439-4421 (2008 Mar)

**Author(s):** Gernhold U; Ehrensperger-Reeh P; Laubereau B; Kufer M; Wildner M; Nennstiel-Ratzel U

**Institution:** Bayerisches Landesamt für Gesundheit und Lebensmittelsicherheit, Gesundheitsförderung Pravention und Sozialmedizi (GE4) Veterinarstr. 2 85764 Oberschleissheim. [ulrike.gernhold@lgl.bayern.de](mailto:ulrike.gernhold@lgl.bayern.de)

**Language:** German

**Abstract:** INTRODUCTION: The pathomechanisms of SIDS are not yet completely understood. However some risk factors are known which can be influenced by simple prevention measures. In order to spread this knowledge and inform young parents, an information campaign was launched in Bavaria in the year 2005. Different occupational groups were involved. METHODS: Firstly, an analysis of interviews and questionnaires of maternal units and parents concerning knowledge and implementation of recommendations for SIDS prevention was done. Subsequently information material was developed and distributed and a publicity was started. A flyer containing simple and evidence-based recommendations was also translated in foreign languages to reach disadvantaged people. RESULTS: Analysis of the questionnaires showed shortfalls concerning information and implementation of recommendations for SIDS prevention. There was high request for the information material. The demand increased impressively after public relations work. Up to the end of October 2007, 233 046 flyers had been dispatched, 42 959 in foreign languages. The greatest part was sent to material units and local health departments.

DISCUSSION: The information campaign had a good response. Further intensification and inclusion of different professional workers and extension is necessary as well as extension of publicity. All efforts have to be done to reduce the risk of SIDS.

**Country of Publication:** Germany

**Publication Type:** English Abstract; Journal Article

**Subject Headings:** [Germany/ep \[Epidemiology\]](#)  
[\\*Health Promotion/mt \[Methods\]](#)  
[\\*Health Promotion/og \[Organization & Administration\]](#)  
[Humans](#)  
[\\*Infant Mortality](#)  
[Infant, Newborn](#)  
[\\*Outcome Assessment \(Health Care\)](#)  
[\\*Risk Assessment/mt \[Methods\]](#)  
[Risk Factors](#)  
[\\*Sudden Infant Death/ep \[Epidemiology\]](#)  
[\\*Sudden Infant Death/pc \[Prevention & Control\]](#)

**Source:** MEDLINE

## 20. Infant sleep position: back to sleep.

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**Citation:** Child Health Alert, January 2010, vol./is. 28/(5), 1064-4849;1064-4849 (2010 Jan)

**Author(s):** anonymous

**Language:** English

**Country of Publication:** United States

**Publication Type:** Journal Article

**Subject Headings:** [\\*Health Education](#)  
[\\*Health Promotion](#)  
[Humans](#)  
[Infant](#)  
[\\*Parents](#)  
[\\*Posture](#)  
[\\*Sleep](#)  
[\\*Sudden Infant Death/pc \[Prevention & Control\]](#)

**Source:** MEDLINE

**Full Text:** Available in *fulltext* at [ProQuest](#)