



REDUCING THE RISK OF SIDS AN UPDATE



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Introduction

The precise cause/s of SIDS is/are still not known. There is, however, increasing evidence that simple public health measures (advising parents not to put baby to sleep on his/her stomach (prone), not to let baby get too hot while asleep, to breast feed and not to smoke) can reduce the SIDS rate. It is important that all parents of neonates in Queensland be made aware of this information so that as many SIDS cases as possible can be prevented.

SIDS Risk Factors

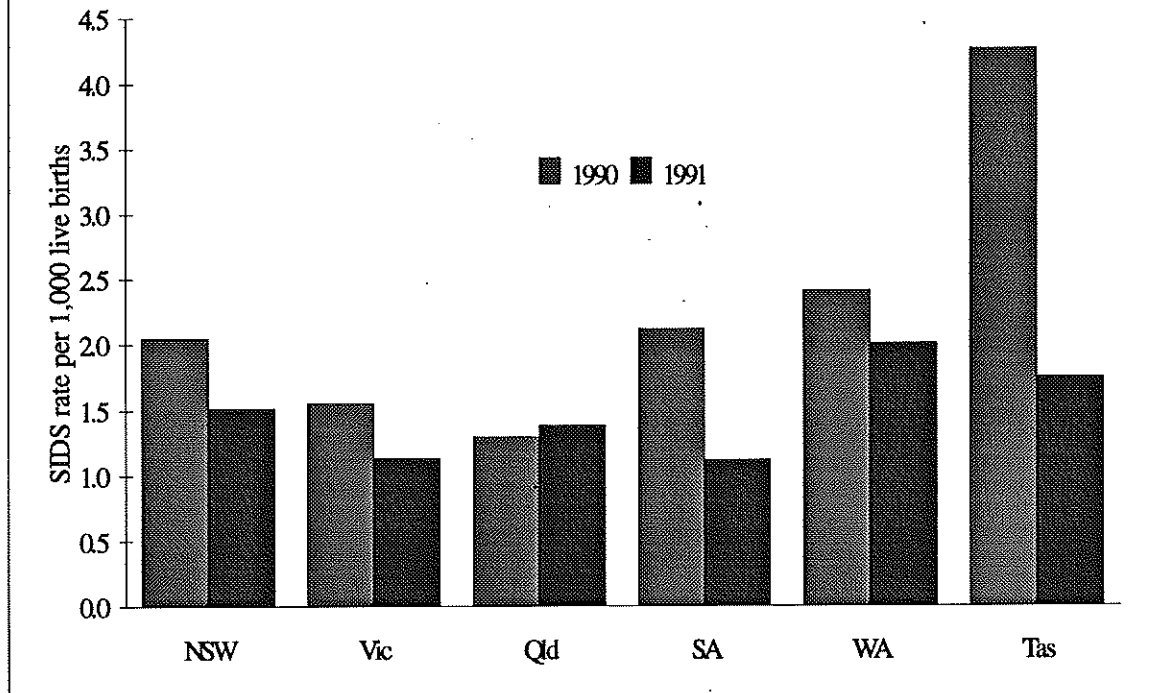
Risk factors for SIDS have been the subject of extensive research and a number of possibilities have been put forward. These include: preterm birth, low birthweight, intrauterine growth retardation, young maternal age, low socio-economic status, maternal smoking, not breast feeding, overheating and stomach sleeping. Of these, putting baby to sleep on his/her stomach, letting baby get too hot while asleep, not breast feeding and smoking are behaviours that might be modified by a public health campaign. Of these four behaviours, not breast feeding and smoking are related to many other diseases of infancy. Overheating and stomach sleeping appear more specific for SIDS¹.

Reduce the Risks Campaigns in Other States

During 1990/91, New South Wales, Victoria, South Australia and Tasmania instigated extensive public health campaigns advising parents of the link between SIDS and stomach sleeping, hyperthermia, not breast feeding and smoking. These campaigns co-incided with a fall in the SIDS rate (Figure 1).

A study conducted by the Menzies Centre for Population Health Research in Tasmania found that the proportion of infants sleeping on their stomachs in that state fell from 31% in 1990 (before the public health campaign) to 13% in 1991. The Centre has concluded that this reduction in the proportion of infants placed to sleep on their stomachs was a major contributing factor in the decrease in the SIDS rate in that state (Ponsonby A-L., pers. comm.).

FIGURE 1. SIDS RATE (PER 1,000 LIVE BIRTHS) BY STATE
1990 & 1991



Queensland

Historically, there has been a clear north/south gradient of increasing SIDS incidence in Australia³. Queensland has had low SIDS rates (1979-89 average: 1.6 per 1,000 live births) while Tasmania has had consistently high rates (3.7). However, following the extensive publicity campaigns in the southern states this north/south gradient disappeared. Australian Bureau of Statistics data for 1991 showed that there had been virtually no change in the Queensland rate (1.4). By contrast, other States had reduced SIDS rates in 1991 and for the first time, Victoria (1.1) and South Australia (1.1) recorded lower rates than Queensland, and New South Wales (1.5) had a comparable rate^{4,5} (Figure 1).

For Queensland, data are also available for the first six months of 1992. There were 26 SIDS cases during this period. This compares with an "expected" 25 cases (based on data for 1988 to 1990 and adjusted for seasonality)⁶. It will be necessary for close monitoring of SIDS rates to continue.

A recently published Australian Bureau of Statistics survey conducted during July 1992 found that in Queensland, the proportion of infants under six months of age who were placed to sleep on their stomachs (16.2%) was over twice the Australian average (7.5%)⁷.

Because Queensland is starting from a lower baseline the scope for improvement may not be as great as in the southern states. It is also possible that the adverse effect of stomach sleeping might not be as pronounced in warmer areas⁸. However, the relatively high prevalence of infant stomach sleeping in Queensland coupled with the marked decrease in the SIDS rates in states where extensive public health campaigns were undertaken suggests that a vigorous Queensland campaign is warranted.

Proposed Reduce the Risks Campaign for Queensland

During 1993, the Queensland Sudden Infant Death Research Foundation in co-operation with Queensland Health will be running an extensive campaign to promote awareness of modifiable SIDS risk factors. Because there is evidence to suggest that it is difficult to change the sleeping position of babies who are already sleeping on their stomachs⁸, the campaign will be directed at the parents of neonates and health professionals involved in advising parents about child care practices. One of the main aims of the campaign is to ensure that information concerning SIDS risk factors becomes incorporated into the standard antenatal and postnatal advice given to new parents.

While acknowledging that there is no sure way to prevent SIDS, the campaign will emphasise that by taking simple precautions parents can reduce the risk. Information publicised will include the following:

- current research suggests that not sleeping baby on his/her stomach and not letting baby get too hot when asleep can reduce the risk of SIDS,
- breast feeding and keeping baby in a smoke free environment may also reduce the risk,
- for infants with certain medical conditions stomach sleeping may be recommended
- parents should consult their doctor.

References

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