MYTHS AND FACTS ABOUT SIDS

Myth: Babies who sleep on their backs are likely to choke if they spit up or vomit.
Fact: Since we started putting babies to sleep on their backs, SIDS deaths have been cut in half. During this time, deaths due to choking have not increased. It turns out those babies who die from choking after vomiting are more likely to have been sleeping on their bellies.

Myth: Putting babies to sleep on their sides is just as safe as putting them on their backs.
Fact: Babies can roll out of the side position and may be found face down in their bedding.

Myth: Babies who don’t sleep in cribs won’t die of “crib death.”
Fact: SIDS can happen anywhere.

Myth: Babies who sleep with their parents are less likely to die of SIDS.
Fact: Sometimes the risk of SIDS can be higher when babies sleep with their parents. Adult bedding is soft and can bunch up near the baby’s face, blocking the flow of air. Overtired parents, or parents who have been drinking or taking drugs, can fall into such a deep sleep that they can roll over their baby without even waking up. Older children also can accidentally roll over on the baby and not wake up.

Myth: When babies sleep on their backs, they develop flat spots on the backs of their heads.
Fact: This is temporary and more of a problem for babies who are always on their backs. Babies should be on their bellies while awake and being watched for playtime.

FOR MORE INFORMATION
- The North Dakota SIDS Management Program at 800.472.2286 or visit www.ndmch.com/sids/default.asp
- North Dakota SIDS Affiliate at 701.224.1600

This brochure was made possible by a grant from the CJ Foundation for SIDS.
SIDS FACTS

Sudden infant death syndrome (SIDS) is the sudden death of an infant younger than age 1 that remains unexplained after a thorough case investigation, including a complete autopsy, examination of the death scene and review of the clinical or medical history.

SIDS, or crib death, is the leading cause of death in babies between 1 month and 1 year of age.

SIDS is the cause of death for approximately 2,500 babies in the U.S. (in 2000).

The risk of SIDS is two and one-half times greater for American Indians than Caucasian babies.

Most SIDS deaths happen in babies who are between 2 and 4 months old.

SIDS occurs more often in boys.

Babies placed on their tummies to sleep are much more likely to die of SIDS than babies placed on their backs to sleep.

More SIDS deaths happen in colder months.

SIDS cannot be predicted or prevented.

SIDS occurs in families of all races and income levels.

WHAT CAN YOU DO TO REDUCE THE RISK OF SIDS?

• Place a healthy baby (birth to 12 months) on his or her back to sleep (unless otherwise directed by your baby’s doctor) in a safety-approved crib with a firm, tight-fitting mattress.

• Place baby “feet to foot,” with feet at the foot of the crib (rather than centered in a crib) and with blankets fastened under the sides of the mattress below the baby’s armpits.

• Keep pillows, quilts, comforters, sheepskins, toys, positioning devices, bumper pads and other soft items out of the crib.

• Avoid sleeping with your baby. Place baby in a crib to prevent suffocation.

• Dress baby in a diaper, shirt and sleeper; no hat or extra clothing.

• Make sure everyone who cares for baby knows to place your baby on his or her back to sleep for bedtime and napt ime.

• Do not place baby on a waterbed, sofa, soft mattress, beanbag, pillow, car seat, infant swing, bouncy chair or other soft surfaces to sleep. If the baby should fall asleep on or in any of the above, remove baby and place baby on his or her back in a crib to sleep.

• Never allow anyone to smoke near or around baby.

• Keep room temperature between 65 and 70 degrees F.

• Breastfeed, if possible.

• Keep regular doctor visits for you and your baby.
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