

## Baby bed-sharing on the rise, but healthcare providers can help reverse trend

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The number of infants sharing a bed with their caregivers increased between 1993 and 2010, especially among black and Hispanic families, but this unhealthy trend could be reversed with education from healthcare providers, according to Yale School of Medicine researchers. Their findings are published in the Sept. 30 issue of *JAMA Pediatrics*.

Sharing a bed with an infant is common practice in many countries, but there have been strong links between the practice and sudden infant death syndrome (SIDS). To prevent sleep-related infant deaths, the American Academy of Pediatrics recommends that infants share a room with their parents, but not a bed for sleeping.

Eve Colson, M.D., professor of pediatrics at Yale School of Medicine, and her colleagues interviewed nighttime <u>caregivers</u> of infants—85% of whom were mothers—participating in the National Infant Sleep Position Study. This study consists of annual phone surveys of 18,986 caregivers in 48 states. Almost half of the caregivers were 30 years or older, had at least a college education, and had a yearly income of at least \$50,000. More than 80% of the participants were white.

The participants were given a list of places infants usually sleep and were then asked where their infants slept in the past two weeks; and whether the baby slept alone, or shared a bed with another person or child. If the infants did share, the caregivers were asked about quilt and comforter use. They were also asked whether a physician or other healthcare provider had ever discussed sleeping arrangements, and whether the



provider's attitude was positive, negative, or neutral about bed-sharing.

Colson and the team found that between 1993 and 2010 the incidence of baby bed-sharing more than doubled from 6.5% to 13.5%. They also found that white infants slept in bed with their caregivers less often than black or Hispanic infants. More than half of the participants also reported that they did not receive advice from healthcare providers about bed-sharing. Participants who received healthcare provider advice to not bed-share were more likely to follow that advice. If a healthcare provider was indifferent, the participants were more likely to bed-share.

"This shows that a healthcare provider's advice matters, and they can play a key role in educating caregivers about the possible dangers of bed-sharing," said Colson, who also emphasizes that the widening racial disparity is very troubling. "We find this concerning because black infants are at a higher risk of dying of SIDS than white and Hispanic infants."

Colson said more studies are needed to investigate some of the factors related to the racial disparity in bed-sharing.

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