

## Fewer SIDS deaths in U.S., but gaps among racial groups remain

May 15 2017, by Kathleen Doheny, Healthday Reporter



(HealthDay)—Fewer U.S. babies are dying from SIDS, but certain



minorities remain at greater risk, a new study finds.

Researchers who tracked cases of Sudden Infant Death Syndrome (SIDS) from 1995 through 2013 found that American Indian/Alaska Natives and blacks had double the rate in 2013 compared to whites.

That was so despite a significant decline in SIDS rates among blacks during the study period, the researchers found.

Why these disparities exist isn't clear. Dr. Alessandro Acosta, a neonatologist at Nicklaus Children's Hospital in Miami, speculated that socioeconomic, cultural or even biological differences may be to blame.

"This is a novel study," due to the breakdown in statistics from different groups, said Acosta, who wasn't involved in the research.

The problem of SIDS has been known for years. In 1994, a national campaign urged parents to place infants on their backs to sleep, to reduce deaths.

"We have well documented that the rates of sudden infant unexpected death decreased sharply after the 'Back to Sleep' campaign," said study leader Sharyn Parks.

"What we didn't know is what sorts of patterns were underlying it," said Parks, an epidemiologist at the U.S. Centers for Disease Control and Prevention.

For this study, Parks and her team tracked the rates of sudden unexpected deaths over nearly two decades, looking separately at different racial and ethnic groups.

Following a decline in the late 1990s, the overall rate remained stable



after 2000 —about 93 cases out of every 100,000 live births, the researchers found.

Rates changed little for American Indian/Alaska Natives or for whites. Hispanic and Asian/Pacific Islander infants had lower rates of sudden death compared to whites for the entire study period, with Asian/Pacific Islanders showing the greatest decline.

Most deaths happened at about 1 or 2 months of age, and girls were less likely than boys to die of a sudden death, the study found.

The study did not explain the disparities. But, Parks speculated that modifiable risk factors, such as putting a baby to sleep on the stomach or on soft bedding, could help explain some of the findings.

It's also possible that public health campaigns aren't reaching certain population groups, the study authors said.

And some experts suggest that some infants are simply more vulnerable to sudden infant death, for reasons not yet fully understood.

Acosta tells parents to be especially vigilant the first one or two months. "We see most of the episodes in newborn to 4 months," he said. However, he added that older infants can succumb as well.

## Advice to parents?

"Always put your baby to sleep on his back," Acosta said. He also tells parents to follow the additional tips in the Back to Sleep campaign. These include not using soft bedding and not bringing an infant into bed with you.

Put infants to sleep on a firm, not soft, surface, Parks added. Also, make



sure anyone caring for the infant, such as grandparents and babysitters, is up to date on the best sleeping practices, she said.

The study was published online May 15 in *Pediatrics*.

**More information:** Sharyn Parks, Ph.D., M.P.H., epidemiologist, U.S. Centers for Disease Control and Prevention, division of reproductive health; Alessandro Acosta, M.D., neonatologist, Nicklaus Children's Hospital, Miami; May 15, 2017, *Pediatrics*, online

To learn more about SIDS, see the <u>U.S. National Institutes of Health</u>.

Copyright © 2017 HealthDay. All rights reserved.

Citation: Fewer SIDS deaths in U.S., but gaps among racial groups remain (2017, May 15) retrieved 20 March 2024 from <a href="https://medicalxpress.com/news/2017-05-sids-deaths-gaps-racial-groups.html">https://medicalxpress.com/news/2017-05-sids-deaths-gaps-racial-groups.html</a>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.