



Take destiny in your hands  
Initiative for precautions against Sudden Infant Death

# Foreword

**Dear Parents,**

**To give birth to a healthy baby is one of the greatest miracles of all.** Many parents already start to worry about their child's health during pregnancy. Those worries do not disappear after the baby has been born. Sudden Infant Death Syndrome (SIDS) causes headaches for many parents and is still very often a taboo topic in our society. However, SIDS does not have to be an unavoidable fate. You can reduce the risk for your baby by following the precautions recommended by experts.

This brochure provides an overview of the newest scientific findings on SIDS. It is intended to support you in reducing the risk for your baby to a minimum, which unfortunately can never be fully excluded even when following all of the recommendations given.

All recommendations apply to normally developed, full-term babies. Please remember that the information contained within is not a substitute for a personal consultation with your pediatrician. If you are concerned or unsure, contact your family doctor or pediatrician. The SIDS clinic in your area is also ready to provide personal assistance and support. You will find contact information on the last page of this brochure.

**Take destiny in your hands.**

Ing. Andrea Zügner-Lenz  
Chairwoman, SIDS Austria

# Current Austrian expert recommendation



*„Only by strictly following precautionary measures can parents reduce the risk of SIDS for their baby. The current recommendations reflect the state of the art of medical science.“*

**University Professor Dr. Reinhold Kerbl**

**Head of the SIDS Outpatient Clinic, Head of Children’s Dept. at the Leoben-Eisenerz Regional Hospital**

Sudden infant death is not necessarily a fated occurrence. Risk factors and preventive measures have been identified through extensive research and have been summarized for Austria by a panel of experts. The panel consists of members from pediatrics, children’s dentistry, ENT and developmental psychology and is supported by midwives, concerned parents and members of „SIDS Austria“. All those involved have pooled their experience and latest knowledge to provide sound information for parents dealing with this difficult subject. Together they developed an up-to-date expert recommendation to serve as a basis for SIDS precautions for parents and doctors alike. After international studies had repeatedly shown that the use of pacifiers when going to sleep reduced the risk of Sudden Infant Death, these measures were included in the list of preventive measures in 2006. In order to deal with the questions and concerns of parents relating to pacifier use, an “operating manual”, selection criteria and tips for the correct handling of pacifiers were included in the expert recommendation.

Unfortunately, there are always cases of SIDS that cannot be prevented despite all of these measures. However, by following the precaution measures you can take destiny in your hands and reduce the risk for your child to a minimum.

## SIDS-risk

Some babies have a higher risk of Sudden Infant Death from the start. If you are concerned or unsure, contact your pediatrician or a SIDS clinic in your area.



### Children with a higher risk of SIDS are:

- Premature babies with complications during pregnancy.
- Children with a low birth weight.
- Babies with health problems during their first weeks.
- Children who were exposed to nicotine, alcohol or drugs during pregnancy.
- Babies from a family in which a child has previously died from SIDS.
- Children with previous life-threatening events or after an incident of lifelessness.

# Recommended precautionary measures

Around the world, SIDS is researched extensively, which constantly brings new scientific findings. For example, the correct recommended sleeping position has changed several times over the past few years. The following measures reflect the latest scientific findings and should be followed to keep your child's risk as low as possible.

- Children should always be put in bed lying **on their back** for sleeping. Front and side positions increase the risk of SIDS. Children should sleep in suitable **baby sleeping bags**. These must always be the correct size for the child. Do not use blankets as they may slide over the face.
- Use a **firm, breathable mattress** in good condition and do not place any plastic liners between the sheet and mattress.
- Babies should sleep in the parents' bedroom, but **in their own cot**, which should have a duckboard. Do not place cots in front of radiators or windows.
- In the cot: **no lambskin, no nests and pillows** and no fluffy animals.
- The temperature in the bedroom should remain between **18 and 20 degrees Celsius**.
- The baby's **clothing** should be **suitable for the temperature of the surroundings**. Parents tend to dress their children too warmly. In the sleeping bag a body stocking or thin pyjamas are sufficient – no socks, no hats, etc. The higher the surrounding temperature, the less the baby should wear.

# Recommended precautionary measures



- Babies should **not be left alone**. Stress caused by being alone, restlessness and emotional tensions are risk factors for Sudden Infant Death.
- When possible, babies should be **exclusively breastfed** during the first six months. If your baby is not breastfed, you should choose formula milk according to age and offer the baby sufficient physical contact.
- **Smoking** during pregnancy and in the baby's environment **is to be absolutely avoided**. Every cigarette not consumed by mother and child (actively and passively) reduces the risk of Sudden Infant Death. Newborns who were exposed to nicotine during pregnancy are very often underdeveloped and have a lower birth weight.
- If you have chosen to give your baby a pacifier, you should use it every time your baby goes to sleep during the first year of life. Pacifiers should only be used after breastfeeding is fully established. There are, however, babies who will not accept a pacifier. Particular attention should then be paid to the other preventive measures.

**Go to your regular maternity passport check-ups.**

# Precaution measures: Pacifiers when going to sleep

International research has shown that giving the baby a pacifier when going to sleep reduces the risk of Sudden Infant Death. Consequently, in 2006 a panel of experts officially recommended for the first time that babies should use a pacifier when going to sleep. If your baby does not accept a pacifier, you should follow the other precaution measures more carefully. Pacifiers should only be used after breastfeeding is fully established (normally at the latest at the end of the first month of life).

## Proper use – no side effects

If pacifiers are used correctly and weaned off in time (at the latest the third birthday), they will usually have little or no negative effects on your child's development. It is also very important to choose the right pacifier.

Only top-quality, symmetric and orthodontic pacifiers will prevent your baby from developing tooth and jaw malocclusions.

Your baby should only be given a pacifier when it really needs it: if it wants to sleep, needs comfort or to relax. As soon as your baby is doing better, the pacifier should be removed. In principle, pacifiers should be given for short periods of time and not be left permanently in the baby's mouth.

Take care not to have too many pacifiers lying around your home so that your child is not tempted to have one when it's not actually needed. Pacifier use should be gradually reduced as soon as children start to speak. Your baby can only learn to speak understandably and correctly with nothing in its mouth.

**Consult your dentist or pediatrician!**







# SIDS precautions test

Answer the following questions to the best of your knowledge. Perhaps you will find some things you can change in order to reduce your child's risk of SIDS.

1. Which sleeping position is best for your child?

2. Does anyone smoke in your home or in the presence of your baby?

3. Where does your baby sleep and what is the room temperature?

4. Do you breastfeed or plan to breastfeed your baby?

5. What does your baby's cot look like?

6. What does your baby wear for sleeping? How do you cover your baby?

7. Does your baby take a pacifier or are you intending to give your baby a pacifier?

# Recommended SIDS precautions

Here you will find the recommended measures for the individual questions. By carefully following them, you can reduce your child's risk to a minimum. For questions and details, contact your pediatrician or a SIDS clinic in your area. You can also take this test with you on your next visit and discuss it with your pediatrician.

- 1. Your baby must sleep in the supine position, as long as it cannot turn around by itself.** Sleeping on the side is not stable enough and the prone position is a major risk for Sudden Infant Death. While awake though, you should let your baby lay on its tummy as long as you are right there.
- 2. Never smoke in your baby's sleeping area.** Smoking during pregnancy also has negative effects on the development of your baby. Children from families who smoke have a higher risk of dying from Sudden Infant Death. You should also avoid "bringing" nicotine in your clothes or hair into the baby's environment. Every cigarette not consumed actively and passively by mother and child reduces the risk of SIDS.
- 3. Babies should sleep in their parents' bedroom, but in their own cot.** The crib should not be placed next to a window or radiator. Room temperature should be between 18 and 20 degrees Celsius. Overheating increases the risk of Sudden Infant Death.

# Recommended SIDS precautions

- 4. When possible, babies should be exclusively breastfed during the first six months.** Breast milk is the best for your child, prevents allergies and provides plenty of physical contact. Breastfeeding reduces the risk of Sudden Infant Death. If your baby is not breastfed, you should choose formula milk according to age and offer the baby lots of physical contact.
- 5. The cot should have a firm, breathable mattress in good condition.** Do not put pillows or stuffed animals in the cot. Nests around the cot bars should not be used as they could cover your baby's face and prevent it from breathing freely. Do not use a plastic liner between the sheet and mattress – this might overheat the baby. Moleton sheets are recommended for protecting the mattress. The cot should have duckboards.
- 6. You should use a proper size baby sleeping bag from the beginning instead of a blanket.** Your baby should wear light clothes inside the sleeping bag – a body stocking or light pyjamas are enough. There are sleeping bags in different materials for both summer and winter. Be sure to avoid overheating your baby. The higher the surrounding temperature, the lighter the sleeping bags and clothing required.
- 7. Scientific studies have shown that using a pacifier when going to sleep can greatly reduce the risk of SIDS.** If parents decide to use a pacifier, they should give their babies an orthodontic pacifier suitable for their age every time they put them to sleep. Pacifiers should, however, only be used after breastfeeding is fully established (normally at the end of the first month of life).

# SIDS & breastfeeding



*“Breastfeeding reduces the risk of Sudden Infant Death and prevents allergies. Breastfeeding and pacifiers are not a contradiction, but an ideal combination for reducing the risk of SIDS.”*

**University Professor Dr. Karl Zwiauer**  
Head of the Department for Pediatrics, St. Pölten  
Chairman of the Nutrition Commission of the Austrian Society for Pediatrics

When possible, babies should be exclusively breastfed during the first six months. In the first months of life, breast milk is the best food for your baby. Breastfeeding prevents allergies and ensures your baby has plenty of physical contact.

However, correct breastfeeding has to be learned, as incorrect breastfeeding often leads to sore nipples. Expecting mothers should prepare themselves for breastfeeding before birth. Attendance at birthing courses or visiting a lactation consultant is recommended. After birth and in case of breastfeeding problems a visit to a breastfeeding outpatients' clinic or joining a breastfeeding group may be helpful. These offer support for breastfeeding problems, good advice by experienced lactation consultants and you will hear how mothers in the same situation are feeling.

During the first days of life your baby should be put to the breast as often as possible in order to adapt your breasts to feeding and to stimulate milk production. During the entire breastfeeding session you should let your baby decide when it wants to drink. However, resting phases of approximately 2 hours should soon be established so that your baby has time to digest and the breasts can produce more milk.

Mothers often believe they have too little milk, because the baby wants to keep drinking. Many newborns have a very strong need for sucking which cannot be satisfied by feeding alone.

## SIDS & breastfeeding

Once breastfeeding is established, a pacifier is a sensible compliment. However, do not use a pacifier to postpone breastfeeding sessions or to change your breastfeeding routine, as this might lead to reduced milk production.

If you do not breastfeed your baby, you should choose a formula milk according to age and provide plenty of physical contact for your baby. If you bottle-feed your baby, hold it as if it was being breastfed. This means as close as possible to your body so it can feel your warmth and heartbeat.

The frequently mentioned nipple confusion does not occur as often as said. For most healthy newborns, switching between bottle and breast is not a problem. Premature babies very often show that they can adapt to exclusive breastfeeding after tube and bottle feeding. Babies are quite able to distinguish between the breast and a pacifier and accept both.



# SIDS & breastfeeding



*„Breastfeeding should not be painful. Breastfeeding should be pleasant. Not only for the newborn, but for the mother as well.“*

**Renate Großbichler-Ulrich**  
President of the Austrian Midwives Board

Most expecting mothers are highly motivated to exclusively breastfeed their babies for the recommended six months. Basically, nature has also ensured that every woman can breastfeed her baby. Sometimes though, unwanted pain arises and we often hear things like: „Hang in there for a while. That is completely normal. Breastfeeding always hurts at first.“

To this we can clearly say: Breastfeeding should not hurt! Breastfeeding should be pleasant. And not just for the newborn. The time shortly after birth is an incredibly important phase in baby’s life as well as the mother’s. This time should not be filled with pain and fear of doing something wrong.

## **What can be done if you experience pain or sore nipples?**

Important: Take the pain seriously and be sure to get things clarified immediately! It is always our experience as midwives that it is usually enough to observe how the baby is put on the breast and make corrections. In most cases the cause of the problem is quickly corrected. Sometimes the problem can be solved by examining the breasts before and after putting the baby on. Location and appearance of redness, fissures, bruises or deformed, squeezed nipples provide information on the causes such as improper positioning of the baby.

As midwives, we know that pain and soreness of the nipples have different causes and are always a sign that something isn’t right. With the help of a midwife, the reasons for an unpleasant experience can usually be found and corrected quickly.

**We wish you a wonderful breastfeeding experience!**





# Correct handling of the pacifier



*“If pacifiers are used correctly, i.e. for falling asleep, for calming and comforting, no tooth or jaw malformations should occur. However, pacifiers have to be suitable for the child’s age and should be orthodontic.”*

**Dr. Verena Bürkle**  
President of the Austrian Society for Pediatric Dentistry

Timely weaning off from the pacifier is important. At the latest on their third birthday children should have completely stopped the pacifier. If you notice beforehand that your child has developed a protruding upper jaw or an open bite (i.e. there is a space between the upper and lower incisors when biting down), you should visit your dentist. An open bite can correct itself if the pacifier is given up quickly. An open bite is not only unattractive, it also prevents the child from biting correctly and can cause problems when speaking and swallowing.

## **Please follow the rules below for pacifier use right from the start:**

- Pacifiers should only be given when necessary and never without a reason. You can offer a pacifier when your child needs comforting, relaxing or to calm down. As soon as your baby is doing better, remove the pacifier.
- During the first year, pacifiers should be always used when putting your baby to sleep as a precaution against SIDS. Remove the pacifier if your baby loses it while sleeping. Do not put it back in the mouth.
- Babies very often have a strong need for sucking which cannot always be satisfied by feeding. Instead of letting your baby suck on the thumb or other objects, you should offer a pacifier. Pacifiers cause less damage to the teeth than thumbs. And besides, it’s much easier to wean off a pacifier than a thumb.

# Tips for weaning



*“A pacifier has many advantages. It gives your baby self-esteem, as it learns to calm down and comfort itself with a pacifier. This is the first step towards independence. The next step though, consists of the child accomplishing this without a pacifier.”*

**Profesor Emerita Dr. Brigitte Rollett**  
Developmental Psychologist  
President of the Society for Learning Therapy

## Tips for weaning:

- From the very first words, get your child used to the idea that talking goes much better without a pacifier. Gently remove the pacifier whenever you talk with your child.
- On the third birthday at the latest, your child should be weaned off the pacifier.
- Restrict pacifier use to certain places: use it only in bed, for example.
- Give away the pacifier symbolically: agree on a reward with your child.
- Use children’s books and fairy tales for weaning.
- Use your child’s self esteem („You’re so big now; you don’t need a pacifier any more“).



# Selection criteria for suitable pacifiers



*“Something so near to your child like a pacifier should be carefully selected and used.”*

**University Professor Dr. Hans-Peter Bantleon**  
Head of the Department for Orthodontics at the University Dental Hospital, Vienna

## Material

- The material of the teat should be as soft as possible so that the pacifier can adapt perfectly to the unique jaw of your child.
- Pacifiers must conform to European Safety Standard EN 1400.
- Both latex and silicone are suitable from the beginning.

## Teat shape

- Pacifiers should have a symmetric teat and not be pre-shaped to adapt to the special conditions of each individual mouth. Symmetric pacifiers cannot be put into the mouth upside-down, which could negatively affect your child's dental health.
- Cherry-shaped pacifiers (round teat) should never be used, as they are not orthodontic and cause tooth and jaw malocclusions.

# Selection criteria for suitable pacifiers

## Size

- A pacifier has to suit the size of the baby's mouth. The child's jaw grows rapidly during the first months of life. Therefore, please follow the manufacturer's age recommendations.
- Pacifiers which are too small have fewer negative effects on your child's development than ones that are too large. Do not switch too quickly to the next larger size.

## Shield

- The pacifier shield should be anatomically shaped. The curve should adapt to the shape of the child's mouth to avoid malocclusions.
- An anatomically shaped pacifier presses the shield to the lips over the teeth and prevents them from being pushed too far forward.

## Ventilation holes

- Big ventilation holes enable your baby to breathe even if the entire pacifier gets into the mouth. Additionally, the skin around the mouth is sufficiently aired and saliva can dry off.

## Knob

- A knob keeps the baby from pulling the pacifier out by chance. Furthermore it is not possible to attach strings or linen diapers on the knob, which could lead to strangulation. Please attach only special pacifier leashes on pacifiers and never make them longer.

## What is SIDS Austria?

SIDS Austria is a parents' initiative against Sudden Infant Death with a scientific background. Through SIDS Austria, concerned parents can share with each other and try to cope with their experience together. Specialists in the fields of psychology and pediatrics as well as others concerned are there for your support.

### Please contact us:

**SIDS Outpatient Clinic, Graz University Hospital of Pediatrics,**  
**kklschlaflab@klinikum-graz.at, [www.sids.at](http://www.sids.at)**

### Masthead

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