

**Commentary On:** Alexander RT, Radisch D. Sudden Infant Death Syndrome Risk Factors With Regards to Sleep Position, Sleep Surface, and Co-Sleeping. *J Forensic Sci* 2005;50:1–5.

Sir:

Alexander and Radisch's (1) article sheds little light on the epidemiology of sudden infant death syndrome (SIDS) and adds nothing to the debate on the safety of maternal–infant bed sharing. We have several objections to the methodology of the study and the conclusions of the authors.

The authors do not know the prevalence of bed sharing in the population. They report that 37.3% of the SIDS victims were co-sleeping with their mothers. In our population-based study of Oregon mothers and their infants (mean age 4 months), 35.2% of mothers reported always or almost always bringing their infants to bed with them and an additional 41.4% reported sometimes bed sharing (2). The National Infant Sleep Position Study found that 19.4% of mothers, bed shared at least half the time and another 27.6% did so sometimes (3). The consequence of not knowing the proportion of bed sharing in their population is that they have no way to know whether bed sharing was a risk factor or a protective factor for SIDS in their study population.

But the more serious problem in their analysis is that they begin by acknowledging that there is no consensus about whether bed sharing with a nonsmoking adult increases SIDS risk, and then they go on to report on the prevalence among SIDS victims of co-sleeping as if it were “an already established risk factor.” In fact, any association between SIDS and maternal–infant bed sharing, if the mother is a nonsmoker, has yet to be established. There have been nine large-scale case–control studies of the relationship between bed sharing and SIDS. Four case–control studies did not stratify by maternal smoking status, but three found no increased risk for SIDS (4–7). Five case–control studies (8–12) reported results stratified by maternal smoking status; three found no risk for infants of nonsmoking mothers (9–11); and one found only a small and declining risk for infants under 8 weeks of age (12). Infants bed sharing with smoking mothers are at significantly increased risk of SIDS. However, the preponderance of the scientific evidence does not currently support a similar risk among nonsmoking mothers.

Finally, infants who sleep on sofas and chairs, known risks (4), should not be lumped with those who sleep on adult beds, an unproven risk. Similarly, infants who sleep with other children, a known risk (4), should not be lumped with those who sleep with (nonsmoking) mothers, again an unproven risk.

We believe that further scientific research is needed to finally resolve the controversy surrounding maternal–infant bed sharing—research that is well controlled, sufficiently powered to stratify the sample by infant age and maternal smoking status, and takes into account the diagnostic drift that is occurring (13,14). In the absence of convincing scientific evidence, while bed sharing

by smoking mothers must be strongly discouraged, bed sharing by nonsmoking mothers must be respected as an acceptable option.

## References

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