

[Perl, et al, \(2010\)](#) found that at least one modifiable risk factor (such as those previously listed) was present in 96% of the deaths; a total of 78% of the deaths had anywhere from two to seven risk factors.

Protective Factors for Sudden Infant Death Syndrome

A meta-analysis indicated that exclusive breastfeeding for any period of time significantly decreased the overall risk of SIDS ([Hauck, Thompson, Tanabe, et al, 2011](#)). Some studies have found pacifier use in infants to be a protective factor against the occurrence of SIDS; the data for pacifier use in infants in the first year of life are said to be more compelling than data linking pacifier use to the development of dental complications and the inhibition of breastfeeding ([American Academy of Pediatrics, Task Force on Sudden Infant Death Syndrome, 2011](#)). Therefore, the American Academy of Pediatrics recommends using a pacifier at naptime and bedtime, using a pacifier only if the infant is breastfeeding successfully, not using a sweetened coating on the pacifier, and avoiding forcing the infant to use the pacifier.

The [American Academy of Pediatrics, Task Force on Sudden Infant Death Syndrome \(2011\)](#) recommends that all infants be placed to sleep in the supine (on the back) position and emphasizes that medically stable preterm infants and infants diagnosed with gastroesophageal reflux be placed in a supine sleep position unless there is a specific upper airway disorder wherein the risk of death from the condition is greater than the risk of SIDS. The supine sleep position has not demonstrated an increased risk of choking and aspiration in infants, including those with gastroesophageal reflux ([American Academy of Pediatrics, Task Force on Sudden Infant Death Syndrome, 2011](#)).

Since the Back to Sleep campaign in 1994 advocated non-prone sleeping for infants, an increased incidence of positional plagiocephaly has been observed (see later in the chapter). It is recommended that an infant's head position be alternated during sleep time to prevent plagiocephaly. Infants may be placed prone during awake periods to prevent positional plagiocephaly and to encourage development of upper shoulder girdle strength ([American Academy of Pediatrics, Task Force on Sudden Infant Death Syndrome, 2011](#)). Updated childhood immunization status has also been shown to be protective against SIDS.