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### A letter to the editor in reply to 'Swaddling and the risk for Sudden Infant Death Syndrome: A meta-analysis' (Pease et al., 2016)

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- 23 June 2016

## A letter to the editor in reply to Swaddling and the Risk for Sudden Infant Death Syndrome: A Meta-Analysis (Pease et al., 2016).

- [Eline L. Möller](#), Postdoctoral Researcher Research Institute of Child Development and Education, University of Amsterdam
- Other Contributors:
  - Roos Rodenburg, Assistant Professor
  - Harvey Karp, Assistant Professor

As noted by the authors, this meta-analysis of four studies on the relationship between Sudden Infant Death Syndrome (SIDS) and swaddling has multiple limitations (e.g., unclear definitions of swaddling and SIDS; varied methods of swaddling in different counties occurring over a span of 30 years). The study reinforces the previous published finding that prone and side sleeping are SIDS risk factors, especially for swaddled infants,<sup>1</sup> and reiterates the AAP's strong recommendation that infants should only sleep on the back (whether swaddled or not).<sup>2</sup>

A slightly increased risk of SIDS among supine swaddled infants appeared, but the authors cautioned that methodological limitations made drawing conclusions from that modest finding unreliable: "further studies are needed to quantify whether this practice [swaddling of back sleeping infants] poses any risk" (p. 7). However, not considered was the issue that is arguably the most pertinent to parents and practitioners: do the benefits of supine swaddling outweigh the risks?

We believe three significant topics were omitted from the discussion that would have given a fuller perspective on the interpretation of the findings. First, not mentioned was a recent study of the deaths of swaddled babies reported to the US Consumer Product Safety Commission (CSPC) between 2004 and 2012, when millions of swaddle wraps and blankets were sold.<sup>3</sup> This study noted 22 deaths; Ten deaths were associated with wearable blankets and swadd...

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### Conflict of Interest:

None declared.

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- 11 May 2016



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### Subjects

Fetus/Newborn Infant

Fetus/Newborn Infant

SIDS

**RE: Swaddling may Reduce DHEA which may Increase SIDS**

- [James M. Howard](#), Biologist independent

I suggest the connection of swaddling with SIDS is low DHEA.

Following a high level of DHEA at birth, DHEA levels decline sharply during the first year.

It is my hypothesis of 1985 that low DHEA during sleep produces SIDS because of lack of stimulation of the brainstem. (Very briefly, it is my hypothesis that the function of sleep is to produce DHEA which stimulates consciousness when DHEA levels increase sufficiently during sleep. My mechanism suggests that the light-dark cycle is involved in stimulating DHEA. This requires melatonin production during the dark phase which then results in the production of DHEA. Sleep occurs as DHEA levels decline at the end of the day. Throughout sleep, periodic stimulations of DHEA occur in order to maintain brainstem function. As these stimulations occur, a point is reached which produces sufficient DHEA to induce consciousness.; the cycle then begins again. The function of sleep / circadian rhythm is production of DHEA.)

In 2002, regarding "Spontaneous Arousals in Supine Infants While Swaddled and Unswaddled During Rapid Eye Movement and Quiet Sleep," Pediatrics, December 2002, VOLUME 110 / ISSUE 6, Gerard, et al., I posted a comment in which I suggested that reduced arousal in swaddled infants is caused by low DHEA and that low DHEA in infants can produce SIDS.

At birth, DHEA levels are very high but decline during the first year to very low levels (chart). Again, I suggest that the connection of swaddl...

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**Attachment(s)**

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**Conflict of Interest:**

None declared.

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