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| **Results of the National Working Group; death at day-care centers** |
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| **Introduction** Since 1996, data of infants that died suddenly and unexpectedly are gathered for preventive purposes by the National Cot Death Working Group. The aim of this study is to investigate a possible increase in cot death at day-care centers and to analyze risk en preventive factors.  **Material and Methods** This retrospective observational study uses data of the National Cot Death Working Group. The total dataset exists of 301 infants that died suddenly and unexpectedly between 1996 and 2012 in the age of 0-2 years. Infants in the age of 3-10 months who died at child care centers are compared to those of the same age that died at home.  **Results** Of 301 infants who died from 1996 to 2014, 31 died in a daycare center and 35 at home in the same time period. The other infants (67) died outside the home, for example in the hospital or in the car. These infants are excluded from the study. Of the total cot death group, 10% died at the child care center and during the same time period 12% died at home, which suggests that no excess mortality occurs at the day care centers. The relative risk  is calculated by comparing the data of the Central Bureau of Statistics, showing that infants in the age of 0-2 years visit the day care for 12-17 hours per week. The relative risk is (31/0.31)x(0.69/35)=2.0. Comparing the risk and preventive factors of both groups and using a regression analysis,  we find that significantly more mothers and fathers of infants who died at home smoked and more parents used a duvet. Furthermore, at the day care centers more infants were found for the first time in the prone position (62% (13) versus 36% (9) (ns).  **Conclusions** The OR for stay at a day care center is 2 and from 1996 to 2012 cot death in day care centers did not increase. Day care centers seem to use the “day-care center cot death prevention protocol” and the Dutch Health Inspection controls the infant care practices at the day care centers regularly and effectively. On the basis of this retrospective analysis, these preventive measures are effective in keeping SIDS numbers in day-care centers relatively low. |
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