

Estructura del resumen

Tipo de presentation Indique: oral, poster, o ambos

Titulo:

Authors: Nombres y graduacion (A continuación filiación del primer autor solamente)

Antecedentes

Objetivos:

Metodos:

Resultados:

Conclusiones:

Recursos Funding source:

Filiación del autor :

Nombre (s) del autor (Iniciales y apellido) y nivel de graduacion (solo uno) Filiación del primer autor solamente . El autor que presenta el resumen . debe figurar en primera instancia en la lista y a continuación los demás coautores

Redactando el resumen

- Los trabajos deberán ser presentados en inglés.
- La fuente debe ser Arial 12
- Todos los resúmenes excepto propuestas de talleres deben ser inferiores o iguales a 500 palabras
- Escriba con solo espacio al final de cada frase
- No utilizar negrita para enfatizar dentro del texto
- Utilizar una coma antes de la final "y" u "o" en una lista de elementos
- Los números del uno al diez se escriben en palabras a menos que se utilicen como una unidad de medida, excepto en las figuras y tablas

- Use-retornos individuales para separar los párrafos. No utilizar tabuladores o sangrías para empezar un párrafo.
- No utilice las funciones automatizadas de software, tales como la partición de palabras, notas al final, encabezados o pies de página (en especial para las referencias). Usted puede utilizar la numeración de páginas

EXAMPLE

Type of Presentation: Oral, poster or both

Title: Evaluation of Bedtime Basics for Babies: A U.S. Crib Distribution Program to Reduce the Risk of Sleep-related Sudden Infant Deaths

Authors: FR Hauck, MD, KO Tanabe, MPH, TL McMurry, PhD, RY Moon, MD
University of Virginia, USA

Background: There is growing evidence that roomsharing without bedsharing is associated with a reduced risk of SIDS. Several countries, including the US, recommend that infants sleep in a crib or bassinet next to the parents' bed. However, many parents continue to bedshare for a number of reasons, including lack of access to a safe crib. , A number of free crib distribution programs have been implemented throughout the U.S. However, no large-scale evaluation of the impact of crib distribution programs has been conducted.

Objectives: To evaluate the effectiveness of Bedtime Basics for Babies (BBB), a national crib donation program, that included distribution of a crib, pacifier, wearable blanket and safe sleep/SIDS and SUID risk reduction education to high-risk families. The specific objectives were to:

- 1) Compare parental knowledge and practice regarding infant sleep position and location before and after receipt of the BBB materials.
- 2) Compare bedsharing rates before and after receipt of the crib.
- 3) Compare use of pacifiers before and after receipt of the BBB materials.

Methods: A total of 17,243 cribs, pacifiers and wearable blankets were distributed in Washington State, Indiana, and Washington, DC. During the first 2 years of the project, data were collected using a standardized survey before and 1-3 months after crib distribution. Surveys asked about parental beliefs, attitudes and practices with regard to infant sleep and about the impact of receiving a free crib. Bivariate analyses were conducted.

Results: 3,303 mothers responded to the prenatal survey (conducted prenatally, before distribution of materials); 1,483 responded to the postnatal survey (conducted before distribution of materials in the early postnatal period); and 1,729 responded to the follow-up survey. Knowledge of the recommended sleep position was 76% in the

prenatal survey, 77% in the postnatal survey, and 94% in the follow-up survey. The proportion of infants placed supine for sleep “last night” was 80% and 87% in the postnatal and follow-up surveys, respectively ($P < 0.001$). In the prenatal survey, 8% of mothers responded that they would sleep with their baby, compared with 38% in the postnatal survey who reported that they were bedsharing (pre-intervention). However, post-intervention, 16% reported bedsharing compared with 38% in the postnatal survey ($P < 0.001$). Among mothers who reported smoking postnatally, 33% were bedsharing before the intervention and 22% after the intervention ($P < 0.01$). Sleep location in crib/bassinet increased from 51% in the postnatal survey to 90% in the follow-up survey ($P < 0.001$). Pacifier usage was not affected by the intervention, with 71% and 74% of infants reported as using a pacifier in the postnatal survey and the follow-up survey, respectively ($P = 0.17$, NS).

Conclusions: Receiving free cribs and education about safe sleep recommendations influenced mothers’ behavior and thus has the potential to reduce the incidence of sudden sleep related infant deaths in high-risk families. We recommend that all families who would otherwise not be able to afford a crib be provided one and be given consistent safe sleep advice.

Funding: The Bill and Melinda Gates Foundation and First Candle.

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