

Safe Infant Sleep Recommendations on the Internet: Let's Google It

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Objectives To determine the accuracy of information on infant sleep safety on the Internet using Google. We hypothesized that the majority of Web sites would accurately reflect the American Academy of Pediatrics (AAP) recommendations for infant sleep safety.

Study design We searched for advice using 13 key phrases and analyzed the first 100 Web sites for each phrase. Web sites were categorized by type and assessed for accuracy of information provided, based on AAP recommendations. The accuracy of information was classified as "accurate," "inaccurate," or "not relevant."

Results Overall, 43.5% of the 1300 Web sites provided accurate information, 28.1% provided inaccurate information, and 28.4% were not relevant. The search terms "infant cigarette smoking," "infant sleep position," and "infant sleep surface" yielded the highest percentage of Web sites with accurate information. "Pacifier infant," "infant home monitors," and "infant co-sleeping" produced the lowest percentage of Web sites with accurate information. Government Web sites had the highest rate of accuracy; blogs, the lowest.

Conclusion The Internet contains much information about infant sleep safety that is inconsistent with AAP recommendations. Health care providers should realize the extent to which parents may turn to the Internet for information about infant sleep safety. (*J Pediatr* 2012;161:1080-4).

The Internet is an increasingly common source for health-related information and medical questions.¹ In 2010, 59% of the US population used the Internet to search for health information,^{2,3} with parents searching for health information regarding their children among the top users.³ Furthermore, almost 70% of adults surveyed reported that information found online has affected their health decisions or actions.⁴ Access to health information on the Internet has the potential to empower patients and revolutionize health care. Indeed, 61% of adults who use the Internet for health information believe that it has improved how they care for themselves or someone else.⁴ One study found that increased access to health information, including Internet information, was associated with a decrease in pediatric visits.⁵

Persons who use the Internet to search for health information generally trust the information found. In a national survey, 72% of adults agreed that one can believe most or all of the health information presented on the Internet.⁴ However, depending on the topic and the Web site, the reliability and accuracy of health information on the Internet ranges from poor to excellent.^{6,7} This is true for Web sites addressing pediatric concerns as well.⁷⁻⁹

The American Academy of Pediatrics (AAP) has published recommendations for infant sleep safety to reduce the risk of sudden infant death syndrome (SIDS), suffocation, strangulation, entrapment, and other accidental sleep-related infant deaths.^{10,11} However, parents and health care professionals frequently have questions and concerns about specific recommendations,¹²⁻¹⁵ and the Internet is likely a primary source of additional information. No previous study has documented the accuracy and reliability of information on infant sleep safety available on the Internet.

Google, one of the most popular Internet search engines, is frequently used by both patients¹⁶ and physicians¹⁷ to access health-related and medical information. The typical adult seeking health information on the Internet will begin not at a medical Web site, but rather at a search Web site and will spend at least 30 minutes on a search, during which she or he will visit 2-5 different Web sites.⁴ To evaluate the accuracy of information regarding infant sleep safety encountered by a typical user conducting an Internet search, we attempted to simulate this experience by conducting Internet searches on the Google Web site. We hypothesized that the majority of Web sites uncovered in our Google searches would accurately reflect the AAP recommendations for infant sleep safety.

Methods

We searched for advice with 13 key phrases relating to infant sleep safety (Table I), chosen to reflect specific AAP recommendations for infant sleep safety.^{10,11} For each recommendation, up to 2 key phrases were used to perform a search on www.google.com. Web sites were categorized by type (Table II; available at

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AAP	American Academy of Pediatrics
SIDS	Sudden infant death syndrome

Table I. Acceptable advice for key phrases based on AAP recommendations for safe infant sleep environment

Recommendation	Key phrase	Acceptable advice
Sleep position	Infant sleep position	Back position only for all periods of sleep. Side sleeping is not advised.
Sleep surface	Infant sleep surface	Infants should sleep on a firm sleep surface. No soft materials or objects (ie, pillows, quilts, comforters) should be placed under infant. A firm crib mattress, covered by a fitted sheet, is the only recommended sleeping surface.
Bedding	Safe infant bedding	No soft objects or loose bedding should be on or in bed.
	Infant sleep bedding	Bumper pads should not be used.
Smoking	Infant cigarette smoking	No smoking during pregnancy. Infant should not be exposed to second hand smoke.
Room sharing	Infant room sharing	The risk of SIDS is decreased if the infant sleeps in the same room as the parent.
Pacifier	Pacifier sleeping	Pacifiers have been shown to reduce the risk of SIDS. For breast-fed infant, delay until 1 month to ensure that breast-feeding is established.
	Infant pacifier	Infants should be lightly clothed for sleep.
Overheating	Infant overheating	Infants should be dressed similar to how parent/guardian is dressed. Overbundling should be avoided; infant should not be hot to the touch.
Infant products	SIDS products	Avoid products marketed to reduce the risk of SIDS.
Home monitors	Infant home monitors	Do not use home monitors as a risk reduction method.
Bed sharing	Infant bed sharing	Infants should always sleep alone on own sleep surface.
	Infant co-sleeping	

www.jpeds.com) and assessed for accuracy of information provided, based solely on consistency with AAP recommendations^{10,11} (Table I). Each appearance of a Web site was noted, because some Web sites appeared more than once in a single search. The type of Web site was identified by analyzing the site's URL and checking the Web site for any section titled "About Us" or something similar (Table II). The accuracy of the information found on each Web site was classified as "accurate" (consistent with current recommendations), "inaccurate" (inconsistent with current recommendations), or "not relevant" (did not address the topic, did not give advice, was a nonworking Web site, or was unrelated to the key phrase).

Because we believed it unlikely that a typical search would extend further, we analyzed only the first 100 Web sites (8-10 pages of results) for each of the key phrases. We also analyzed the first page of search results (10-12 Web sites) separately, to evaluate the accuracy of information on the Web sites that a typical searcher would most likely read. Four researchers performed the searches independently over a 2-month period. To minimize observer bias, strict definitions for acceptable advice were used to determine the accuracy of Web site contents (Table I). Any uncertainty or disagreement about the accuracy of a Web site's content was resolved through discussion and ultimate consensus among the researchers. This study was granted exemption by the Children's National Medical Center Institutional Review Board.

Results

A total of 1300 Web sites (100 for each of the 13 key phrases) were analyzed in July and August 2011 and reanalyzed for accuracy after the most recent AAP guidelines were published,¹¹ specifically with regard to the new recommendation against all bumper pad use. The proportion of Web sites with accurate information varied depending on the key phrase

analyzed. Overall, 566 of the 1300 Web sites searched (43.5%) provided accurate information, 365 (28.1%) provided inaccurate information, and 369 (28.4%) were not relevant to the key phrase (Table III). Excluding the Web sites that were irrelevant, 60.8% of the relevant Web sites provided accurate information.

The key phrases associated with the highest percentage of Web sites with accurate information were "infant cigarette smoking" (82% accurate), "infant sleep position" (74% accurate), and "infant sleep surface" (73% accurate). For each of the other 10 key phrase searches, less than 58% of the Web sites (range, 14%-58%) contained accurate information. The key phrases yielding the highest percentage of Web sites with inaccurate information were "pacifier infant" (14% accurate), "infant home monitors" (18% accurate), and "infant co-sleeping" (20% accurate). When the search results were limited to the first page of Web sites (Table IV), excluding the 24 Web sites that were not relevant, 67.3% of the relevant Web sites contained accurate information.

Table III. Number of first 100 Web sites with accurate information, by key phrase searched*

Key phrase	Accurate	Inaccurate	Not relevant
Infant sleep position	74	11	15
Infant sleep surface	73	16	11
Safe infant bedding	47	7	46
Infant sleep bedding	58	28	14
Infant cigarette smoking	82	11	7
Infant room sharing	38	62	0
Pacifier sleeping	40	5	55
Pacifier infant	14	1	85
Infant overheating	52	48	0
SIDS products	17	28	55
Infant home monitors	18	19	63
Infant bed sharing	33	64	3
Infant co-sleeping	20	65	15
Total	566 (43.5%)	365 (28.1%)	369 (28.4%)

*Based on recommendations made by the AAP Task Force on SIDS.^{10,11}

Table IV. Web sites (as shown on the first page of the Google search results) with accurate information, by key phrase searched*

Key phrase	Accurate, n (%)	Inaccurate, n (%)	Not relevant, n (%)	Total
Infant sleep position	9 (90)	1 (10)	0	10
Infant sleep surface	7 (70)	3 (30)	0	10
Safe infant bedding	8 (72.7)	1 (9.1)	2 (18.2)	11
Infant sleep bedding	6 (54.5)	0 (0)	5 (45.5)	11
Infant cigarette smoking	10 (100)	0 (0)	0 (0)	10
Infant room sharing	5 (50)	5 (50)	0 (0)	10
Pacifier sleeping	4 (40)	3 (30)	3 (30)	10
Pacifier infant	2 (20)	0 (0)	8 (80)	10
Infant overheating	7 (70)	3 (30)	0 (0)	10
SIDS products	5 (50)	3 (30)	2 (20)	10
Infant home monitors	4 (36.4)	4 (36.4)	3 (27.3)	11
Infant bed sharing	3 (30)	7 (70)	0 (0)	10
Infant co-sleeping	4 (36.4)	6 (54.5)	1 (9.1)	11
Total	74 (55.2)	36 (26.9)	24 (17.9)	134

*Based on recommendations made by the AAP Task Force on SIDS.^{10,11}

In terms of type of Web site, the most common type encountered in our searches was company/interest group sites (n = 250), closely followed by retail product review sites (n = 246) and educational sites (n = 241) (Table V). An analysis of the accuracy of information by type of Web site found that government Web sites had the highest rate of accuracy (80.9%), followed by organization Web sites (72.5%). Company/interest group, news, sponsored links, and educational Web sites had similar, lower rates of accuracy, ranging from 50.6% to 52.4%. Web sites from individuals and blogs provided accurate information 30% and 25.7% of the time, respectively. Finally, retail product review Web sites provided accurate information only 8.5% of the time. When sites that were not relevant were excluded, the Web sites providing the highest and lowest rates of accurate information remained the same. Government and organization Web sites had the highest rates of accurate information (86.7% and 83.1%, respectively), and blogs, retail product review Web sites, and Web sites from individuals had the lowest (30.9%, 36.2%, and 45.5%, respectively).

Table V. Accuracy of information about infant sleep safety by type of Web site*

Type	Accurate, n (%)	Inaccurate, n (%)	Not relevant, n (%)	Total
Government	72 (80.9)	11 (12.4)	6 (6.7)	89
Educational	121 (50.2)	99 (41.1)	21 (8.7)	241
Establishment	74 (72.6)	15 (14.7)	13 (12.8)	102
News site	29 (50.9)	21 (36.8)	7 (12.3)	57
Company/interest group	131 (52.4)	54 (21.6)	65 (26.0)	250
Individual's site	20 (30.3)	24 (36.4)	22 (33.3)	66
Sponsored link	69 (50.7)	40 (29.4)	27 (19.9)	136
Retail product review site	21 (8.5)	37 (15.0)	188 (976.4)	246
Blog	29 (25.7)	65 (57.5)	19 (16.81)	113
Total	566 (46.9)	366 (29.4)	368 (23.7)	1300

*Based on recommendations made by the AAP Task Force on SIDS.^{10,11}

Discussion

National surveys have demonstrated that a high proportion of adults believe most of the health information available on the Internet⁴ and make decisions for themselves and others based on that information.⁴ Other studies have identified variability in the reliability and accuracy of Web sites that provide pediatric health information.^{7,9} Furthermore, one study found that one-half of those who used the Internet to search for health information did not verify the source or currency of the information, relying instead on “common sense,” the authors speculated that this may be related to people’s general trust in the reliability of Internet information.⁴ However, another study found that when parents hear mixed messages about a specific health recommendation, they are more likely to discount that recommendation as unimportant.¹⁸ Therefore, it is disturbing that less than one-half (43.5%) of the Web sites found in our Google searches for key phrases related to infant sleep safety provided accurate information. Even after excluding Web sites that were irrelevant, only 60.8% of the relevant Web sites provided accurate information and advice.

In general, government and organization Web sites had the highest rates of accurate information (80.1% and 72.5%, respectively). Government Web sites with either inaccurate or irrelevant information generally contained outdated information. There was no specific topic that predominated in the inaccurate category for government Web sites. In contrast, organization Web sites generally consistently contained updated information about infant sleep safety. The organizations represented in these Web sites included health awareness, parenting, healthy infant advocacy, and SIDS awareness organizations.

Educational Web sites included those with “.edu” in the URL, books, scientific/medical institution home pages, and peer-reviewed articles. Only 52.4% of these Web sites contained accurate information. Because peer-reviewed articles were assessed for accuracy based on the information available, those for which only a title and abstract were provided, with a subscription required to access the entire article, might have contained additional information in the full text that could have affected the assessment for accuracy. The majority of books found online were either not relevant to the key phrase about infant sleep or provided outdated information.

Several Web sites covered the topics of breast-feeding and bed sharing. These topics engender a great deal of controversy among health professionals, given the correlation between bed sharing and breastfeeding duration,¹⁹ and bed sharing has been linked to increased risk of SIDS, suffocation, asphyxia, entrapment, and other sudden unexpected infant deaths.²⁰⁻²⁶ The high percentage of Web sites with inaccurate information on such controversial topics (eg, promotion of bed sharing as a strategy to encourage breast-feeding) is not surprising, given that accuracy was based solely on consistency with the AAP recommendations.^{10,11}

The Web sites with the highest rates of inaccurate information were retail product review sites, blogs, and individual Web sites. Retail product review Web sites with inaccurate information generally promoted products not recommended by the AAP, such as infant sleep accessories. These Web sites frequently implied that the product was AAP-endorsed (eg, promotes sleeping on the back, which the AAP recommend). Because many of these products are specifically not recommended by the AAP and have no scientific data to support their claims, it is disturbing that these Web sites promote products that generally are unnecessary and actually may pose a danger to sleeping infants. Blogs and individual Web sites often include authors from widely diverse backgrounds, including pediatricians and concerned parents. Thus, both blogs and individual Web sites may present contrasting views. Included in the "individual" Web site category were 3 Facebook pages. The possible impact of these types of Web sites on parent behavior is not yet clear; however, one-half of US adults²⁷ and 73% of the upcoming generation of parents (currently age 12-17)² use social network sites, and thus these Web sites may become more important sources of health information in the future. Forums were also included in the blog category, because there are no requirements or qualifications for contributing to a community conversation. Forums provide an avenue for networking in an inquisitive and supportive manner. However, by their very nature, these virtual conversations may be the source of inaccurate information,²⁸ which may in turn result in potentially dangerous practices. Parents may be in search of support from others who have, for instance, placed their infant in the prone position for sleep without negative consequences and who currently recommend that practice to others. Indeed, in the forums that we encountered in our searches, many parents explicitly dismissed the AAP recommendations, particularly with regard to bed sharing, sleep position, and the use of home monitors.

Sponsored link Web sites, such as [eHow.com](http://www.eHow.com) and [About.com](http://www.About.com), often use hired experts, including physicians, as contributors for specific topics. Thus, the frequently inaccurate information presented on these Web sites was surprising. It is possible that sponsoring entities (such as infant product manufacturers) disagree with specific AAP safe sleep recommendations and/or may be promoting products that are not recommended. Video messages (primarily YouTube videos) were also categorized as sponsored link Web sites. Some 14% of US adults do not have basic literacy skills²⁹; in addition, many others do not have the ability to read and comprehend technical reports. Video can thus be a powerful Internet tool for these parents and serve as an alternative, easily accessible source of information. We found that, with the exception of infant sleep position, for which the videos consistently provided accurate information, videos frequently provided inaccurate or irrelevant information related to infant sleep safety.

We were surprised that news Web sites provided accurate information about infant sleep safety only approximately one-half of the time. In general, national news coverage about

infant sleep care almost always correctly described AAP guidelines, but sometimes highlighted the controversy over specific guidelines rather than the importance of the guidelines themselves. Local news coverage was generally limited to stories about tragic, traumatic, and often fatal incidents, with no mention of AAP guidelines and no information on how other parents can prevent similar mishaps. Parents frequently gauge the importance of an issue by how frequently they hear about it in the news.¹⁸ Thus, if parents have not heard about SIDS or other causes of sudden unexpected infant death in the news recently, they may assume that this is no longer a problem and that they need not take steps to reduce the risk of such an occurrence.

We acknowledge some limitations of this study. There may have been observer bias in determining the accuracy or inaccuracy of Web sites, although we took specific measures to minimize bias. We developed strict criteria for categorizing the Web sites and determining the accuracy of each site. In addition, we limited each search to the first 100 Web sites. Expanding the searches might have altered the results. However, we felt that it was unlikely that the typical parent conducting a search for information on infant sleep safety would search beyond 100 Web sites (8-10 pages).

In conclusion, we found that health- and medical-related Web sites frequently contain inaccurate information about infant sleep safety. It is important for health care providers to realize the extent to which parents may turn to the Internet for information about infant sleep safety and then act on the advice found, regardless of the reliability of the source. Providers should consider offering URLs of specific Web sites that they have identified as accurately reflecting the AAP guidelines and educating families on how to evaluate health-related Web sites for trustworthiness. Websites such as Healthfinder ([healthfinder.gov](http://www.healthfinder.gov)), Medline Plus (<http://www.nlm.nih.gov/medlineplus>), and Health on the Net Foundation (www.hon.ch/HONcode) may be helpful in providing such guidance. Finally, governments and other entities that host Web sites with infant sleep safety information should periodically review the content of the information for accuracy and currency. ■

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Table II. Criterion for the assessment of the types of Web sites encountered on Google

Type of Web site	Criterion
Government	URL ending with or contains .gov or .state
Organization	URL ending with or contains .org
Educational	URL ending with or contains .edu; online ebooks (ie, books.google.com/ ...); and peer-reviewed articles
Company/interest group	Site identified in the “about us” page as involving the conglomeration of ideas from various parties (eg, educators, counselors, parents) or involving content not confirmed by health professionals or government officials
Sponsored link	Site containing links from domain sponsors and advertisements (eg, About.com , eHow.com)
News	Site containing press releases or post dated local or national news articles
Blog	Site powered by WordPress or Blogspot, including photoblogs, or with URL containing “forum.”
Retail and product review	Site promoting the sale of, critic review of, or presentation of various distributors of a product (eg, Amazon)
Individual	Site identified in the “about us” page as detailing one individual’s ideas and/or being funded by an individual (often a health professional)