and monthly temperatures for 1970 and 1971 – but in 1972 there was no correlation at all.

The minimum nocturnal temperature on the actual night of each "cot death" has been determined and shows no relationship, deaths having often taken place during that night which was the warmest for some time. Some children died during the daytime when temperatures were higher than any nights at all.

It does not seem as if temperature, per se, could have any relationship to "cot deaths". Could there be a relationship to the increased bedding "tucked in" over infants in the winter months?

Infections

Approximately one third of our cases gave a history of some infection in the days preceding the death (as was found by Brandt⁷) and a variety of viruses were recovered from 10 per cent of them. Three of our cases died the night after receiving a triple vaccine injection.

Type of Feeding

Of the 86 cases of "cot deaths" occurring in these three years, 83 were artificially fed and only three breast fed at the time of death. Figures taken by well-baby Plunket Nurses (100 successive attendances each by eight nurses) gave a breast feeding rate in Auckland of 45 per cent at two weeks and 25 per cent at three months of age, (Table 2). This is a statistically significant excess of artificial feeding in "cot deaths" $(X^2 = 72)$.

Table 2. Type of feeding in Auckland, New Zealand

	Number	Breast Fed	Artificially Fed	
"Cot deaths"		Dig januag ke 185	MI ISA	
1970-71-72	86	3 (4%)	83	(96%)
1972 Controls at				
2 weeks of age	800	360 (45%)	440	(55%)
1972 Control at				
3 months of age	800	205 (25%)	595	(75%)

These results are very similar to those of Steele¹¹ who found 84.8 per cent of SIDS infants to be exclusively bottle fed. His study contained a high proportion of low birth weight babies among whom artificial feeding is more common than normal birth weight babies because of the difficulty of the mother's keeping up her milk supply if the baby is in the intensive care unit away from her.

As a result of conducting this epidemiological survey an hypothesis of causation has been evolved (see Appendix P-2).

174 SIDS 1974