



Questions and Answers about Safe Infant Sleep for the First Twelve Months of Life

(This information is based on the Safe Sleep Guidelines of the American Academy of Pediatrics, published in Pediatrics, 2016)

What is SIDS?

The American Academy of Pediatrics (AAP) informs us that in the U.S. about 3,500 infants die each year from what are called sleep-related infant deaths. The most common of these sudden unexpected infant deaths is Sudden Infant Death Syndrome or SIDS. It is a diagnosis given when a death cannot be explained even after a thorough evaluation. But even though the causes may not be identified, thanks to the AAP, we know what to do to reduce the risk of these deaths. And, there is an added benefit: These same evidence-based safe infant sleep guidelines also reduce the risk of other sleep-related infant deaths, including accidental suffocation. By following these guidelines, everyone who takes care of a baby has the power to reduce the risk of these deaths. Share them with everyone who takes care of your baby!

How old are babies who die from SIDS?

Ninety percent of these deaths occur by six months of age, and the peak period is from two to four months. Safe sleep recommendations are intended for the first 12 months of a baby's life.

What are the safe sleep recommendations?

First, babies should be put to sleep on their backs. The use of the back to sleep position has resulted in a major decline in sleep-related infant deaths. Neither the side position nor the belly down position is recommended for placing an infant to sleep. Grandparents may remember that they were advised to do the opposite, to put the baby to sleep on the tummy. We know better now, so we do better. Back is best. You should always check with your baby's pediatrician or other health care provider for additional confirmation.

Will my baby choke if placed on his or her back?

There has been no increase in choking or similar problems for babies who sleep on their backs. You should discuss this further with your baby's physician.

What if my baby rolls over to his (her) stomach during sleep? Do I need to put my baby in the back sleep position if this happens?

The AAP recommends that you place your baby on his or her back at the start of all sleep periods in the first year of life. As they develop, a baby may turn over to another position during sleep. The AAP states

that once babies reach the age where they are well able to roll from back to belly and from belly to back on their own, usually by around six to seven months, they can remain in the position they assumed.

I saw a product that said it could keep my baby in the right position during sleep. Can I use it to prevent SIDS?

No. The AAP does not recommend the use of any product that restricts the movement of an infant. These products can and have had unintended consequences resulting in deaths, and some have even been recalled because of that.

Will my baby get flat spots on the back of the head from sleeping on the back?

To protect a baby from the risk of a flat spot, the AAP recommends offering lots of tummy time for your baby when he is awake and being watched by you. Also, make sure that your baby isn't spending all his or her time in a crib, or a car seat or an infant carrier. Pick your baby up, spend time holding your baby, and enjoy lots of cuddle time.

So, besides back to sleep, what else makes up a safe sleep environment?

1. The AAP advises that the safest place for your baby to sleep is in a crib, portable crib, bassinet or play yard that meets current safety standards of the Consumer Product Safety Commission.

(<https://cpsc.gov/safesleep>)

2. It should contain a flat, firm mattress. There should be no sagging. When you lift the baby off the mattress, you don't want to see a deep dent where the baby has been.

3. The mattress should be type intended for the crib or other recommended sleep product you are using.

4. There should be no gaps between the mattress and the sides of the crib or other recommended sleep product.

5. The mattress should be covered just by a tightly fitted sheet.

6. Don't place any pillows or quilts over or under the sheet.

7. In fact, and this is very important, there should be no loose bedding in the crib. No pillows, no quilts, no blankets, no stuffed animals or other soft or fluffy items, and no bumpers either. While these things are pretty, they are associated with an increased risk of sleep-related infant deaths. And, there should be no one else in the baby's sleep space.

8. The AAP recommends that babies are safest sleeping by the parent's bed but not in it. Close by the bed in the parent's room, the parent can still see, touch, and hear the baby. Room sharing instead of bed-sharing is best. Ideally, parents are urged to share their room with their infant for the first year of life or for at least the first six months.

9. Parents may choose to bring the baby into bed to play, comfort, cuddle and feed! But, when parents are ready to fall asleep, it is safest to place the baby in his or her own near-by safe sleep space.

10. Bed sharing with a sleeping parent is especially dangerous when the baby is less than four months of age, was premature or of low birth weight, or with a parent who was or is a smoker. Bed sharing is also especially risky with anyone who has used sedatives or alcohol, is very fatigued, or with anyone who is not the infant's parent.

11. Other situations to avoid are soft surfaces such as a waterbed or old mattress, or sleeping on a sofa, couch or armchair. Sofas and chairs are not designed for babies to sleep on whether alone or with someone and are dangerous. Babies should never be put to sleep on these.

12. Sometimes a tired parent who is breastfeeding at night may fall asleep with the baby in the adult bed. To ensure that the baby is safe until the parent wakes up and puts the baby back into his own nearby sleep space, the AAP advises parents to make sure that their own soft bedding, such as pillows or blankets, are out of reach of the baby so that there is no risk that they will cover the baby's face and cause harm.

Without blankets, how will the baby stay warm on a cold night?

If parents feel that a blanket is necessary, infant sleep clothing, such as a wearable blanket, should be used instead. It should be the right size for the baby. Parents should avoid overheating the baby because overheating is a risk factor for SIDS. You can tell if a baby is overheated by checking if they are sweating or if the chest feels hot to the touch. Over-bundling and covering the face should be avoided.

Why is smoking dangerous during pregnancy?

Smoking is a major risk factor. Smoking by a pregnant mother or by people in her presence can cause harm to the developing baby. Exposing the baby to smoke after he or she is born also is a major risk factor. If a mother has stopped smoking during pregnancy in order to protect her baby, she should stay smoke-free even after! Household smoke matters too. It is best to avoid exposing an infant to any tobacco smoke.

Does breastfeeding reduce the risk of SIDS?

Yes! Breastfeeding or breast milk is associated with a lower risk of SIDS! Therefore, for that reason and many others, breastfeeding is highly encouraged. Mothers should provide breast milk whether directly from the breast or by expressing milk. The longer a baby receives breast milk, the lower the risk.

What about pacifiers?

Pacifiers help reduce risk and are therefore helpful. If they are breastfeeding, parents should wait a month or until breastfeeding is well established before introducing the pacifier. The pacifier should not be attached to a string, to clothing, or to a stuffed animal due to the risk of strangulation or suffocation. It should be clean, with nothing coating it, and in good condition. It should be offered but not forced. If it falls out during the night, there is no need to put it back.

Parents are urged to discuss safe sleep guidelines with their infant's health care provider.

Based on the safe sleep guidelines of the American Academy of Pediatrics. Statewide hotline (800) 545-7437. E-mail: scnj@rwjms.rutgers.edu. The SIDS Center of New Jersey (SCNJ), based at Rutgers Robert Wood Johnson Medical School and the Joseph M. Sanzari Children's Hospital, Hackensack Meridian Health, is funded in part through a Health Service Grant from the NJ Department of Health.