



# Safe Sleep

*Sudden infant death syndrome (SIDS)* is defined as the sudden, unexpected death of an infant in the first year of life. Since the beginning of the campaign against SIDS, there has been a 50% reduction in incidence. However, there has been no further improvement in the past several years. It is now clear that just changing the sleep position of an infant is not enough to prevent sleep-related deaths. Many other factors in the sleeping environment impact the risk of SIDS for an infant. Therefore, the campaign against SIDS is no longer just “back to sleep” but is now “safe sleep,” addressing all the known factors that may result in a sleep-related infant death.

The healthcare team is responsible for modeling safe sleep while infants are in the hospital. Evidence has shown that parents copy what they see done in the hospital:

*People learn best through observation, and research shows that parents are more likely to follow safe sleep practices—particularly placing infants in the back sleep position—when they see nursery staff consistently model this behavior in the hospital. A 2002 study in New Haven, Connecticut, found that nurses who placed infants in the back sleep position during the postpartum hospital stay changed parents’ behaviors significantly (Colson & Joslin, 2002).*

In the full-term nursery, safe sleep practices need to be modeled right from delivery. For preterm and sick infants, boundaries and positioning that are appropriate in the early phase of hospitalization need to be eliminated well before discharge. These babies need to be transitioned from *ill* status to *healthy* status first, followed by changing from prone positioning to supine positioning and then from supported to unsupported positioning.

Key principles for protecting infants against sleep-related death include

- eliminating secondhand smoke
- preventing infants from becoming overheated
- teaching the importance of breastfeeding
- keeping immunizations up to date
- using a dry pacifier
- putting the baby to sleep alone (never co-sleeping)
- eliminating soft and loose bedding and toys in the bed
- always placing the infant on his or her back for every nap and at nighttime.

These practices not only need to be thoroughly discussed with the parents of every baby before discharge but also should be modeled while the infant is hospitalized.

## Reference

Colson, E. R., & Joslin, S. C. (2002). Changing nursery practice gets innercity infants in the supine position for sleep. *Archives of Pediatric & Adolescent Medicine, 156*(7), 717–720. doi: 10.1001/archpedi.156.7.717

## Bibliography

- American Academy of Pediatrics Task Force on Sudden Infant Death Syndrome, & Moon, R. Y. (2011). SIDS and other sleep-related infant deaths: Expansion of recommendations for a safe infant sleeping environment. *Pediatrics, 128*(5), e1341–e1367. doi: 10.1542/peds.2011-2285
- Ibarra, B. (2011). Family teaching toolbox: A parent’s guide to a safe sleep environment. *Advances in Neonatal Care, 11*(1), 27–28. doi: 10.1097/ANC.0b013e318206fd5a
- Moon, R. Y., & Fu, L. (2012). Sudden infant death syndrome: An update. *Pediatrics in Review, 33*(7), 314–320. doi: 10.1542/pir.33-7-314
- U.S. Department of Health and Human Services, National Institutes of Health, Eunice Kennedy Shriver National Institute of Child Health and Human Development. (2007). *Curriculum for nurses: Continuing education program on SIDS risk reduction* (06-6005). Washington, DC: U.S. Government Printing Office. Retrieved from [www.nichd.nih.gov/SIDS/sidsnursesce.cfm](http://www.nichd.nih.gov/SIDS/sidsnursesce.cfm)



## Safe Sleep: Information for Parents

### SIDS

The term *SIDS*, or sudden infant death syndrome, is used to describe when babies die in their sleep without any warning before their first birthday. In the early 1990s, parents were told to stop putting babies on their tummies to sleep. They were told to put them on their backs or sides only. Later, experts said the side position wasn't safe either, so parents were told to put their babies only on their backs.

Today, we know that just putting babies on their backs to sleep is not enough to keep some of them from dying in their sleep. There are many other easy things parents can do to keep their babies safe when they sleep.

### Safe Sleep

"ABC" is an easy way to remember how to make babies safe when they sleep. ABC stands for "alone, back, crib."

#### Alone

Babies should *always* sleep alone. That means they should never sleep in the same bed as an adult, another child, or a pet. They should not sleep with anything in their cribs like stuffed toys, pillows, bumper pads, loose blankets, quilts, hats, headbands, bibs, or pacifier holders. The only thing that should be in the bed is the baby.

However, experts say sleeping in the same room with a parent, as long as the parent and baby are in their own separate beds, is safer than the baby sleeping in a room alone. Parents can bring their babies into their beds to feed or comfort, but when parents feel themselves getting sleepy, they need to put their babies back in their own beds.

#### Back

Babies should sleep on their backs for every sleep, for all naps and at nighttime. They should be put on their backs to sleep at home, at day care, at church, or in any friend or family member's home.

### Crib

A *crib* can be a crib, bassinet, Pack-N-Play, play-yard, or playpen, but it should have a firm mattress and be covered with a well-fitted sheet only. It is very dangerous for babies to sleep on a sofa or armchair, because they can wiggle as they sleep and get trapped and be smothered. It is also not safe for them to sleep in a car seat, bouncy seat, swing, baby carrier, or sling, because their neck can bend in ways that makes it hard for them to breathe.

There are some other very important things that can help babies sleep safely:

- Smoking—Keep babies away from people who smoke. We know that babies who are around people who smoke or babies born to mothers who smoke have a higher risk of SIDS.
- Breastfeeding—Babies who are breastfed are less likely to have SIDS.
- Immunizations—Making sure babies get their shots may cut their chances of SIDS by almost half.
- Pacifiers—We're not exactly sure why, but giving your baby a pacifier when he or she is put to sleep helps, too. You shouldn't force your baby to use a pacifier, and if it falls out after your baby is asleep, it's OK. It doesn't have to be put back in. It's important to not start using a pacifier until your baby has learned to breastfeed well.
- Temperature—Keeping your baby from getting too hot can help. Dress your baby in no more than one extra layer than you would be comfortable wearing. Using warm sleepers, known as blanket sleepers, instead of a blanket is a good idea. Blankets can get loose, cover a baby's head, and make it hard to breathe. If you do use a blanket, use it "feet to foot."

First, put the baby in the bed with his or her feet at the bottom of the bed. Then, with the top of the blanket no higher than the baby's chest, tuck it in at the sides and at the bottom of the mattress. This way,



when the baby moves around during sleep, the blanket will stay below the baby's face.



*Foot-to-foot technique. Courtesy of the Safe to Sleep™ campaign, for educational purposes only; [www.nichd.nih.gov/SIDS](http://www.nichd.nih.gov/SIDS).*

- Worries—Parents sometimes worry that babies will choke if sleeping on their backs. Actually, research shows that they are more likely to choke sleeping on their stomachs. Parents also worry their babies won't sleep as well on their backs, and this is probably true. Babies do seem to sleep more deeply on their stomachs, but experts think that because some babies sleep too deeply, they are more likely to die from SIDS. These babies don't wake up in time when they can't breathe. Another thing many parents worry about is the flat or bald spots some babies get on their heads from sleeping on their backs. These almost always go away after babies learn to roll over and sit up by themselves. You should think of these as signs of a healthy baby who has been put to sleep safely.

ABC (alone, back, crib), no smoking, breastfeeding, keeping immunizations up to date, using a pacifier, and not letting a baby get too hot are all things you can do to keep your baby safe while sleeping.