

Safe Sleep for Your Baby Around the Clock: Birth to 12 Months

As a parent or caregiver, you have an important job in choosing where and how your baby will sleep at night and naptime. Your baby's sleep safety is essential to help keep the baby healthy and alive. A number of things may put your baby at risk while sleeping.

What are some risks for SIDS? In general, a risk is something that can increase the chance of a harmful event happening to your baby. For example, sleeping on their tummies puts babies at risk for Sudden Infant Death Syndrome (SIDS). The number of babies dying of SIDS has become much lower since more parents and caregivers began placing babies on their backs to sleep.

Another risk for babies is suffocation in soft bedding. Soft bedding includes pillows, quilts, comforters, sheepskins, pillow-like stuffed toys, and other soft products that may keep the baby from breathing easily. These items should be removed from the area in which a baby is sleeping. Keep your baby's head uncovered during sleep.

Letting a baby sleep in an adult bed can also put your baby at risk for suffocation and SIDS. This risk includes the baby sleeping in an adult bed with **any** adult or child. It is also important to know that SIDS or "crib death" is **not** caused by sleeping in a crib.

Sudden Infant Death Syndrome (SIDS) is the sudden death of an infant under 1 year of age that remains unexplained after a thorough case investigation, including performance of a complete autopsy, examination of the death scene, and review of the clinical history.

(Willinger, James, and Catz. "Defining the Sudden Infant Death Syndrome (SIDS)." Pediatric Pathology 1991; 11(5): 677-84)



The U.S. Consumer Product Safety Commission (CPSC) cautions about using adult beds for sleeping babies:

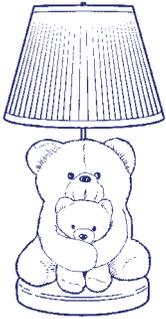
Many parents and caregivers are unaware of the SIDS risk and **hidden hazards when placing babies on adult beds.**

Babies placed on adult beds risk **suffocation from several hidden hazards:**

- Suffocating in soft bedding, such as, pillows, thick quilts, or comforters;
- Falling and becoming trapped between the bed and wall, or between the bed and another object;
- Falling and becoming trapped between the bed frame and headboard or footboard; and
- Falling from an adult bed onto piles of clothing, plastic bags, or other soft materials resulting in suffocation.

Tips To Make Sleeping Safe for Your Baby

The American Academy of Pediatrics (AAP) recommends that parents talk to their baby's doctor or nurse about the baby's sleep area and possible risks. Talk to the doctor or nurse to learn more ways to reduce the risk of SIDS.



Do not forget to talk with your baby's child care providers, grandparents, other family members, babysitters, and all caregivers about the importance of the back sleep position and ways to keep the baby's sleep area safe.

Where Should My Baby Sleep?

Consider placing the baby's crib in your room near your bed. AAP suggests that parents consider placing the baby's crib *near their bed*, rather than having their baby sleep with them in the bed.

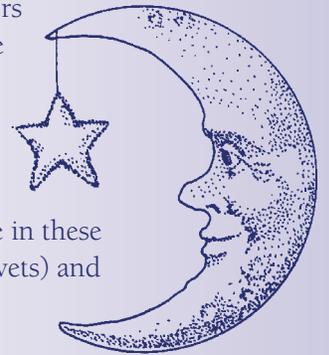
Use a crib and mattress that meet CPSC safety standards. The mattress should fit tightly in the crib. This is to make sure the baby's face is not trapped between the mattress and the side of the crib.

According to the CPSC, a safe crib has...

- A firm, tight-fitting mattress—the mattress is too loose if you can fit more than two finger widths between the edge of the mattress and the crib side.
- A tight-fitting bottom sheet, never use an adult sheet on a crib mattress.
- No loose, missing, or broken hardware or slats.
- No more than 2 3/8" between the slats (about the width of a soda can).
- No corner posts over 1/16" high.

AAP recommends that all infants be returned to their own crib (near the mother's bed) after being brought into an adult bed for nursing or comforting. Bed sharing can be dangerous because of the increased risk of SIDS and suffocation.

- Mothers who choose to have their baby sleep in the bed with them for some or most of the night should take special precautions. Always place the baby on the back to sleep. Potential dangers include spaces between 1) the mattress and headboard or footboard, 2) the bed and other furniture, and 3) the bed and the wall. Babies can become trapped and suffocate in these spaces. Comforter covers (duvets) and pillows should not be used if sleeping with a baby.



Where Not to Sleep

Some of the **dangerous** places for a baby to sleep are

- Couch/sofa
- Recliner
- Waterbed
- Soft mattress
- Any soft surface including pillows, sheepskins, quilts, or cushions
- Any bed with another adult or child

What Position Should My Baby Be In?

Place your baby on the back to sleep at nighttime and naptime. According to the AAP, placing your baby on the tummy to play when awake and being watched by an adult is good for two reasons: 1) it helps the baby develop strong muscles, and 2) tummy time helps to reduce the risk of the baby developing a flat spot on the back of the head.



If your baby starts to roll over from back-to-tummy or back-to-side, you should still place her on the back to sleep. The *Back to Sleep* campaign does **not** recommend that parents and caregivers who place babies on their backs to sleep continually check on them while they are sleeping.

Do not place the baby on the side to sleep. According to the AAP, side sleeping is not as safe as back sleeping due to the risk of the baby rolling over onto the tummy.

How Do I Make My Baby's Sleep Area Safe?

Remove pillows, quilts, comforters, sheepskins, pillow-like stuffed toys, and other soft products from the crib. If bumper pads are used, they should be firm, secured, and not pillow-like.

Consider using a sleeper or other sleep clothing instead of blankets. If using a blanket, place baby with feet at the foot of the crib. Tuck a thin blanket around the crib mattress, reaching only as far up as the baby's chest. Make sure your baby's head remains uncovered during sleep.

Avoid overheating. Babies can be clothed for sleep with a bedroom temperature that is comfortable for a lightly clothed adult. The baby should not be sweating or feel hot to the touch (especially the hands).

DO NOT use any device to prop the baby on the side, or one that claims to "prevent SIDS" and suffocation. According to the AAP, these devices have not been tested to show if they are safe or even reduce SIDS risk. There is no way to prevent SIDS, but there are ways to reduce the risk. The back sleep position is best for your baby.

Breastfeeding

Breast milk is the best nutrition for your baby. Sleeping close to your baby can make breastfeeding more convenient. Having the baby's crib near your bed is recommended. Place your baby in a crib next to your bed after breastfeeding.

Create a smoke-free zone around the baby. Do not smoke during pregnancy and avoid being around other smokers. Make sure that no one smokes around your baby.

Never put your baby to sleep with other children who can accidentally roll over and suffocate the baby.

When traveling or visiting check the safety of **any crib** for your baby, especially motel and hotel cribs (see CPSC guidelines in this publication).

Bed Sharing

The issue of sleeping with your baby is complicated. The evidence suggests that bed sharing with your baby can increase the risk of SIDS and suffocation. **An alternative to bed sharing** is to place the baby's crib near your bed to allow for more convenient feeding and contact. Consider returning the baby to the crib after feeding.

IMPORTANT: If you have been drinking alcohol, or taking drugs/medicines that may make you sleepy, or are excessively tired, do not bring your baby into bed with you to sleep.

If you choose to share a bed with your baby, the following safety measures are recommended:

Protect your baby by using the back sleep position, avoiding soft surfaces or loose covers, and moving the bed or furniture away from the wall to prevent the baby from becoming trapped. Make sure your baby's head remains uncovered during sleep.

Make sure the baby sleeps on a mattress that is firm. The baby's face can get stuck in soft bedding and she might not be able to breathe.

If you choose to bed-share routinely you should consider removing the mattress and placing it on the floor in the middle of the room, thereby helping to prevent the baby from falling or becoming trapped.

AAP Also Recommends:

Consider offering a pacifier at nap time and bedtime:

It has been shown that the risk of SIDS is lower when a pacifier is used during sleep. Using a pacifier does not affect breastfeeding, and does not cause later dental problems. The task force recommends use of a pacifier until one year of age according to the following procedures:

Use the pacifier when placing the baby down for sleep, and do not reinsert once he/she falls asleep. If the baby refuses the pacifier, he/she should not be forced to take it.

- Pacifiers should not be coated in any sweet solution.
- Pacifiers should be cleaned often and replaced regularly.
- For breastfed infants, do not start using the pacifier until 1 month of age to ensure that breastfeeding is firmly established.

Avoid development of positional plagiocephaly (flat head):

- Do not have the baby spend excessive time in car-seat carriers and “bouncers,” in which pressure is applied to the back of the head. It is best to “cuddle” with baby sitting up rather than lying down.
- Adjust the head position while baby sleeps on the back. Ways to do this include placing baby to sleep with the head to one side for a week and then changing to the other side.

Do not use home monitors to reduce the risk of SIDS:

There is no evidence that use of monitors decreases the incidence of SIDS. Also, there is no evidence that in-hospital monitoring of the baby's breathing or heart will show which babies are at increased risk of SIDS.

For the complete version of the AAP recommendations, visit <http://aappolicy.aappublications.org/cgi/content/full/pediatrics;116/5/1245>

For more information, contact the **National SIDS/Infant Death Resource Center (NSIDRC)** at (866) 866-7437. Additional publications are available on the NSIDRC Web site at www.sidscenter.org.

The information in this publication is based on recommendations from the American Academy of Pediatrics (AAP), the National Institute of Child Health and Human Development (NICHD) at the National Institutes of Health (NIH), and the Consumer Product Safety Commission (CPSC). The Association of SIDS and Infant Mortality Programs (ASIP) and First Candle/SIDS Alliance also provided recommendations on safe sleep environment for babies.



National SIDS/Infant Death Resource Center

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