

Safe Sleep to Prevent SIDS

Definition

- Safe sleep means a baby always sleeps on their back.
- Safe sleep reduces the risk of sudden infant death syndrome (SIDS) and suffocation.
- In the past, SIDS was called crib death.

Health Information

Overview

- The U.S. death rate from SIDS is about 3,000 babies each year.
- Since sleeping on the back became the standard advice, the SIDS death rate has dropped by more than half.
- More than 90% of SIDS occurs before 6 months of age. Most occur between 1 and 4 months, before babies learn to roll over.
- About 30% are caused by accidental suffocation.

Causes of SIDS

- **Crib suffocation.** If sleeping face-down on any soft surface, baby's nose and mouth will sink in. This will block their breathing. Babies lack the strength to turn their head to the side. Even on a firm surface, the face-down position pushes the jaw back. This narrows the airway in the back of the throat, reducing air flow. Sleeping on the back keeps baby's airway open and breathing.
- **Adult bed suffocation.** Adult beds are much more dangerous for babies. The mattresses are often softer, such as memory foam. The blankets and pillows could cover their face. A baby can also get their head trapped between the mattress and the wall. Water beds are a death trap for babies.
- **Overlay suffocation.** Sleeping with an adult can lead to baby getting trapped under the adult's body. This makes baby unable to breathe. This is why co-sleeping is never recommended during the first year. The risk is highest if the parent has taken drugs or sedating medicines. Drinking too much alcohol is often a factor. Accidentally lying on and suffocating a baby is a tragedy beyond measure.
- **Risk factors for SIDS.** Risk factors are different than direct causes. There are 2 proven risk factors you can avoid. **Secondhand smoke:** do not allow smoking in your home or car. Do not take your baby into smoky places. **Overheating:** babies can't regulate their body temperature in the early months. Don't overdress them. Don't keep them in a hot car. Keep their room from overheating. Protect them during heat waves.
- **Unknown cause.** At least 30% of the time, the cause of SIDS is unknown. Research is ongoing.

Care Advice

1. Key Points

- Safe sleep means putting baby down to sleep on their back, on a firm surface, and alone. Safe sleep is needed for every sleep, including naps.
- Sleeping face-down increases the risk of SIDS by 5 times, compared to sleeping on the back.
- Bedsharing increases the risk of SIDS by 10 times. Avoid it during the first year.
- Here's some home care advice that should help.

2. **Safe Position: Sleep on the Back**
 - The American Academy of Pediatrics (AAP) recommends babies be put to sleep on their backs.
 - Never put baby to sleep tummy or face down. Reason: this is the main cause of suffocation.
 - Don't put baby to sleep on their side. Sleeping on the side has twice the risk of SIDS as on the back. Reason: the side position is unstable. Baby can fall onto their face, blocking their breathing.
3. **Safe Place: Alone in a Crib**
 - Cribs and bassinets are where babies should sleep.
 - Share a room with baby, but do not share a bed.
 - Avoid letting babies sleep in a swing, bouncer or other sleep product. If they fall asleep in a stroller or car seat, transfer them to a crib as soon as possible.
4. **Safe Surface: Firm, Flat Mattress**
 - Only put baby to sleep on a flat surface.
 - Avoid baby sleeping on an incline. Reason: baby's neck will flex and may block their breathing.
 - Always use a firm mattress or pad.
 - Never use any soft surface. Examples: sheepskin or bean-filled surfaces. Reason: danger of rolling over during sleep and suffocating.
5. **Keep Objects Out of the Crib**
 - Keep blankets, pillows, stuffed toys or bumper pads out of your baby's crib.
 - Reason: these can get against baby's face and block breathing.
6. **Avoid Bed Sharing (Co-Sleeping) with Your Baby**
 - Never sleep with your baby during the first year of life. This is a strong recommendation by the American Academy of Pediatrics (AAP). Room-sharing is recommended instead.
 - The rate of SIDS is 10 times higher for babies sleeping in an adult bed compared to alone in a crib. Reason: suffocation from bedding or adult rolling onto baby.
 - Bed sharing after a year of age is safe, but has pros and cons. For details, see the Sleeping with Parents (Bed Sharing) handout.
7. **Avoid Falling Asleep with Your Baby During a Feeding**
 - This mainly happens during night feedings.
 - The risk of suffocation is more if the parent is sleep deprived.
 - Most sofas and chairs are an even greater risk for the baby. Reason: more places to get trapped and block baby's breathing.
 - **Prevention.** Be aware of this added risk. Have a plan to stay awake. Feed in a room with the TV or music on. Sit in an uncomfortable chair.
8. **Talk to Childcare Staff and Babysitters**
 - Be sure anyone who cares for your baby knows the importance of baby only sleeping on their back.
 - Reason: babies have died in some childcare settings from being placed tummy-down.
9. **Side Effects from Sleeping on the Back**
 - **Weak shoulder muscles.** The shoulder and neck muscles are not used when lying on the back. Tummy time is needed.
 - **Flat head.** Lying on the back too much flattens the back or the side of the head. Position changes prevent this. For details, see the Plagiocephaly (Positional) in Babies handout.
 - **Tummy time.** These problems can be prevented by awake tummy time. Start by 2 weeks of age. Start with 3 minutes, 3 times a day when awake. Always stay with your baby during tummy time. For details, see the Tummy Time handout.

10. **What to Expect**

- In 1994 the AAP recommended the "back-to-sleep" position for all healthy babies.
- Now more than 80% of parents follow this "safe sleep" advice.
- Current research shows this dropped the SIDS rate by more than half.
- Make sure your baby is protected during sleep.

11. **Trusted Resource**

American Academy of Pediatrics website for parents: www.healthychildren.org.

Call Your Doctor If

- You think your child needs to be seen
- You have other questions or concerns

Pediatric Care Advice

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