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Taking steps to keep sleeping infants safe

Although preventable, infant deaths continue to occur, locally and across the country, as parents and caregivers fail to follow the simple recommendations made over 15 years ago by the United States Public Health Service and the American Academy of Pediatrics:

Critical Protective Factors

- Infants should be placed wholly on their backs for every sleep.
- Infants should sleep in a crib, bassinet, or equivalent on a firm mattress that is covered only by a sheet.
- There should be no soft objects or loose bedding in the crib.
- For infants, close but separate sleep arrangements are recommended.
- Infants who normally sleep on their backs are at higher risk in day care or caretaker settings if they are inadvertently put to sleep on their stomachs.
- Infants left to sleep on couches, with or without a napping adult, are at risk for suffocation.

Significant Preventative Factors

- Breastfeeding infants are more easily aroused, which, as some studies indicate, protects from them from sudden infant death syndrome..
- Pacifiers used at nap and bedtime may also provide protection.
- Refraining from smoking during pregnancy reduces, what many studies have shown to be, a major risk factor of SIDS.

SIDS is the sudden death of an infant under 12 months of age that remains unexplained even after thorough investigation. The incidence of SIDS is very low in the first month of life, rises to a peak between 2 and 4 months, and is relatively uncommon after 6 months of age.

When the “Back to Sleep” campaign began in 1992, one in every 850 infants died of SIDS. In 2008, the SIDS rate has fallen to one in 1,800. However, risk is reduced only when “Back to Sleep” and other protective recommendations are followed. Well-meaning, but frequently overtired, parents who bring an infant into their bed to breast or bottle feed, risk infant suffocation should the parent fall asleep. An infant, lying on a soft surface, surrounded by loose bedding and soundly sleeping adults, may be smothered by a pillow or blanket or be turned face down in the bedding when someone rolls over.

Many parents and advocacy groups argue that bed sharing is the natural way for mom and baby to sleep and that it enhances maternal-child bonding. Some studies suggest that, after 3 months of age, co-sleeping may be safe, as long as bed-sharing adults aren’t consuming alcohol or using medications that increase drowsiness.

The Scotch and British have advocated for decades that the safest place for an infant is in a crib, in the parent’s bedroom, for the first six months of life. We agree.

Long before the “Back to Sleep Campaign”, in the Bailey household, all three kids resided in mom and dad’s bedroom until 6 months of age. All three were breastfed at night in the parental bed, but it was dad’s job to get the baby from the cradle to Mom, to stay awake in case Mom dozed off while nursing, and to return the fed and diapered infant to the cradle next to the bed.

Parents need not trade bonding opportunities for infant safety if they take simple precautions that have proven to reduce infant deaths.

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