Safe sleep for infants...why is this so important?

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Why is a sleep environment so important for infant safety? Infant sleep related deaths are the leading cause of death between 1 month and 12 months of life (Safe to Sleep, 2015). In the United States alone, there are greater than 3500 infant sleep related deaths per year. You may be wondering what a sleep related death is. Sleep related deaths include accidental suffocation, strangulation, or can also be an undetermined cause during sleep (Cribs for Kids, n.d.).

The term Sudden Infant Death Syndrome (SIDS) has been around for several years, but many people may not know what that is. SIDS is basically an unexplained infant death less than one year of age following a complete investigation. A newer term you may not be aware of is Sudden Unexpected Infant Death (SUID) which includes a broader category. SUID includes any infant death less than one year that occurs suddenly and unexpectedly. Following an investigation, SUID deaths can be the result of suffocation, entrapment, infection, trauma and/or underlying cardiac or metabolic diseases. SIDS does fall under the umbrella of SUID. Basically they can find a specific reason for the infant death during the investigation, and if not the reason is SIDS (unexplained).

Between 1990-2013, the number of SIDS cases (unexplained causes) has decreased, but the number of accidental suffocation and strangulation in bed has increased (Safe to Sleep, 2015). We may not be able to prevent the unexplained causes of infant death, but we can prevent accidental suffocation and strangulation by providing safe sleep environments for babies. You may have heard of “back to sleep.” This term was coined in the early 1990’s from the American Academy of Pediatrics’ (AAP) Back to Sleep Campaign in an effort to decrease SIDS rates. Since that campaign’s inception, the SIDS rates have decreased, but other sleep related deaths have increased. The APP has since expanded guidelines for safe sleep and the reduction of sleep related deaths in a new policy statement released in 2016. These guidelines include a clear picture of what a safe sleep environment looks like, and things parents/caregivers can do to decrease the risk factor for SUID.

Babies should be placed to sleep on a firm surface on their back. This surface can be in the same room as the caregiver, but on a separate surface. When you think of the “back to sleep” add “bare is best.” Nothing else should be in the crib except the baby. Soft pillows, stuffed animals, extra blankets, fluffy blankets, and pillows should all be removed from the sleep environment. What about bumper pads? Bumper pads are not recommended, and should also be removed. The ties can be a risk for strangulation, and the puffiness of bumper pads can be a suffocation risk. Extra blankets should be removed, and the use of a sleep sac is recommended over blankets, as there is less chance of accidental suffocation or strangulation from loose blankets. Babies should not be put to sleep in car seats, swings, rockers, or other devices. Other AAP (2016) recommendations to reduce the risk of SUID include: breastfeeding, routine immunizations, consideration of pacifier use at naps and bedtime, and avoid overheating the baby, and tobacco smoke.

Elliot Health System recently partnered with the Cribs for Kids Organization to focus on spreading the message for safe sleep. Elliot earned a Bronze Level Certification as a Safe Sleep Hospital in early 2016, and has recently applied for the Gold Level of Certification, which is a Safe Sleep Champion. What have we done to earn that certification? A safe sleep committee was formed to focus strong efforts on sending a consistent message to staff, patients and the public.

What have we accomplished? All women’s and children’s nursing staff have completed standardized current safe sleep information, and will continue to have annual on-going education. All materials provided to patients have been updated, and standardized to be current with AAP recommendations, and to reinforce the messages provided in the hospital following birth. The Halo in house program was introduced into practice in October 2016. This program introduces stable newborn infants to the use of a sleep sac instead of receiving blankets, which is best practice. The Elliot Associates have begun selling sleep sacs in the hospital gift shop, and recently announced the funding of the take home program which will provide a sleep sac to each new baby delivered at our hospital. We are in the process of creating a mock nursery to provide a visual guide to a safe sleep environment for babies, offering different options for safe sleep. This mock nursery will be included as part of childbirth tours to reach the population planning for a new baby. Our final focus is the community. We are reaching out to the community to provide education on the importance of safe sleep, consistent with AAP guidelines.

References: