

## 1 Background

Sudden Infant Death Syndrome (SIDS) is the sudden, unexpected and unexplained death of an apparently healthy infant. The 'Back to Sleep' campaign in 1991 saw SIDS cases in England and Wales fall by two thirds. In the UK there are still just less than **200 babies** who die from SIDS each year.

## 2. Why it Matters

Although the exact cause of SIDS is unknown, research has shown that certain maternal, infant and environmental factors are more commonly associated with babies who die of SIDS than those who survive. Co-sleeping remains a common feature particularly when another additional factor/s is present such as **alcohol/drugs, smoking, and co-sleeping on a sofa/chair**. Despite many new parents/carers saying that they will never sleep with their infant, evidence suggests that up to 70-80% of UK infants at some time have co-slept with a parent during the first three months of life.

According to the latest available figures, around **133 babies die each year in co-sleeping situations**, many of which will be in high risk circumstances. Co-sleeping on a sofa or armchair was the most prevalent risk, with **40%** of parents admitting to having done so and **25%** having done so more than once. An adult falling asleep on a sofa or armchair with a baby increases the risk of SIDS by **up to 50 times**.

Infants who are born preterm or of are of a low birth weight have been shown to have an increased susceptibility to SIDS as they have difficulty in regulating heart rate, breathing and temperature

## 3 Information

Although overnight infant caregiving is given mostly by mothers, fathers too are often involved in putting infants to sleep and soothing them after night time wakening. A survey commissioned by the Lullaby Trust has found that **less than 1/3 of fathers** are being given information on the basic steps they can take to lower the risk of SIDS. UK data suggests that in 50% of the SIDS co sleep cases at least **90%** die in hazardous situations which are largely preventable. (PS, Sidebotham, P, Evason-Coombe, C, Edmonds, M, Heckstall-Smith, EM & Fleming, P 2009)

## 7 Professional Resources

1. <https://www.lullabytrust.org.uk/professionals/>
2. <https://www.lullabytrust.org.uk/professionals/statistics-on-sids/>
3. Postnatal care. <https://www.nice.org.uk/guidance/ng194/chapter/Recommendations>
4. <https://www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2016/07/Co-sleeping-and-SIDS-A-Guide-for-Health-Professionals.pdf>



## 5 Safe Sleep Advice

**Universal Infant Safe Sleep Advice** -The safest place for a baby to sleep at night is in their own Moses basket, crib or cot, placed at the side of the parental bed. Positioned on their back, with feet to foot of the crib/cot. In a room temperature of **16-20 degrees celsius**, wearing appropriate clothing, with head uncovered and outdoor clothing removed. In a **smoke, alcohol, drug free environment**. Appropriate cellular blankets should be used which can be added or removed according to temperature. Cot should be free from toys and pillows.

**Bed-sharing may be planned or unplanned** – eg, many breast feeding mothers chose to co-sleep for ease of breast feeding or may unintentionally fall asleep so it is important to have a parent-centred discussion on safety rather than advise never to bed-share.

## 6 Questions to Consider

- Do we routinely ask about sleeping arrangements and other carer givers?
- Do we ask parents/carers (not just mothers) about alcohol, drugs, smoking and medication?
- Do we discuss infant safe sleep at each planned contact under the age of 12 months?
- Do we routinely ask the question where does your baby sleep during the day and at night?
- Do we routinely see where a baby is sleeping at night and offer advice?
- Do we check the room/s temperature and conditions?
- Are we aware of the current NICE, UNICEF, BASIS and local guidance re: infant safe sleep?

## 4 Inform Parents/Carers

Inform parents and carers that the association between co-sleeping and SIDS is greater with:

- **parental or carer recent alcohol consumption**
- **parental or carer drug use**
- **parental or carer smoking**
- **Low birth weight or premature infants**
- **Co sleeping on a chair or sofa**

Listen carefully and offer information appropriate to their needs. Always be inclusive of fathers in 'meaningful, open, non judgemental conversations' about safer sleep, including co-sleeping.

### Infant Safe Sleep Resources:

1. <https://www.basisonline.org.uk/resources-for-parents/>
2. <https://www.nhs.uk/conditions/sudden-infant-death-syndrome-sids/>
3. <https://www.lullabytrust.org.uk/>