SIDS & REDUCING THE RISKS





ABOUT SIDS

Sudden Infant Death Syndrome (SIDS), is characterized by the sudden, unexpected death of a baby under 1 year of age, which remains unexplained after thorough investigation, including review of the baby's history, death scene investigation, complete autopsy and other associated tests. SIDS is generally related to a phase of sleep. The incidence of SIDS peaks between 2 and 4 months of age and is greatly reduced after the age of 6 months. SIDS is not to be confused with accidental suffocation or strangulation, and is not felt to be associated with vaccinations.

While causes of SIDS are not yet understood, it appears that there is a complex interaction between an underlying medical vulnerability in the baby and various environmental stressors. Some infants appear to be at greater risk for SIDS. They include but are not limited to premature babies, low birth weight babies, male infants, and aboriginal infants as well as twin, triplets and other multiples.

While SIDS cannot be predicted, or prevented, the risks can be reduced if certain recommendations are followed. It is important that every person who takes care of your infant knows and follows these recommendations.

1. BACK TO SLEEP

Place your baby on his/her back to sleep for *every* sleep, nap time or bedtime. Car seats, strollers, wraps, carriers and swings do not allow for the baby to be flat on his/her back and are not recommended for sleep.

If your baby falls asleep while in any type of carrier he/she should be placed flat on their back as soon as possible. Car seats keep babies safe while you are travelling in the car but once you arrive at your destination your baby should be placed flat on his/her back in a safe crib.

Once your baby is able to roll over onto their tummy (around 4-5 months of age), you do not need to reposition them. Causes of SIDS are not yet understood, it appears that there is a complex interaction between an underlying medical vulnerability in the baby and various environmental stressors.



2. FIRM SLEEP SURFACE 3. BREASTFEEDING

Place your baby in a crib, cradle or bassinet that meets current Canadian Safety Guidelines, which you can view here. (See Figure: 1) Use a firm mattress with a fitted sheet only.

DO NOT use or add any soft material to your baby's crib, such as

- Sleep positioners
- **Bumper pads,**
- Comforters
- **X** Blankets
- X Stuffed toys
- X Or Pillows.

It is **not** safe to drape a blanket over the baby's crib to block out light as it may fall into the crib and cover the baby's head.

Breastfeeding can help reduce the risk of SIDS. Breastfeed your baby if possible, for the first 6 months.



4. ROOM SHARE, DON'T BED SHARE

For the first 6 months of life, a baby should sleep in the same room as his/her caregivers. This is called room sharing. Your baby should have his/her OWN sleep surface, a bassinet, cradle, or crib. It should be placed next to your bed but away from windows, plugs, cords, and other potential hazards.

Your baby should **NOT** share a sleep surface (bed, couch, futon, armchair or air mattress) with another child, parent, or caregiver. This could increase the risk for SIDS as well as sleep related deaths such as suffocation or strangulation. If you choose to bring your baby into your bed to feed, make sure to put him/her back in the crib after feeding.

We do recognize that whether intentionally or unintentionally for personal or cultural reasons, or even due to exhaustion, some parents will at some point choose to bed share. Despite documented benefits for sharing a sleep surface with your baby, there are particular conditions which are especially hazardous and can significantly increase the risk of infant death. These include:

Infant sleeping with a parent who smokes or has consumed alcohol, drugs, or sedative medications.

Age of infant less than 4 months.

Infants who were "preterm" or low birth weight.

Sharing sleep surface on a sofa/recliner/arm chair.

Multiple people (adults/children) sharing sleep surface.

Presence of soft materials (pillows, blankets) on the sleep surface.

Use of soft sleep surface.

While the degrees of risk in the absence of these factors is difficult to predict, it is still **strongly** recommended to maintain a **separate** sleep surface for your infant.

5. DO NOT LET YOUR BABY GET TOO WARM

Overheating is felt to increase the risk of SIDS for a baby.

Dress your baby in appropriately sized sleepwear that is comfortable at room temperature; for instance a properly fitted one piece sleep sack that keeps your baby warm but not hot.

6. AVOID EXPOSURE TO SMOKE

Avoid smoking, vaping and exposure to second-hand smoke during your pregnancy. After your baby is born, do not allow anyone to smoke in the presence of your baby. Make your home smoke free and choose a non-smoking caregiver.

7. OTHER RECOMMENDATIONS

- Your baby will need supervised tummy time 2 to 3 times a day to develop his neck muscles and to prevent plagiocephaly (a flat head).
- Always supervise your baby during tummy time. You can start soon after birth and continue until your baby can hold up his/her own head (around 4 months).
- Consider the use of a pacifier after the first 2-4 weeks of age, but do **not** attach any cord to the pacifier as this may put the baby at risk for strangulation.
- Regular prenatal care and routine vaccinations are recommended.



APPENDIX

Figure 1:

https://www.canada.ca/en/healthcanada/services/consumer-product-safety.html

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