

# MYTH

# VS

# FACT

## — Safe Sleep for Infants —



More than 3,600 babies in the U.S. die suddenly and unexpectedly every year from sudden infant death syndrome (SIDS) or accidental deaths from suffocation or strangulation. Many of these deaths are preventable.

According to the National Institute of Health, Sudden Unexpected Infant Death (SUID) is the death of an infant younger than 1 year of age that occurs suddenly and unexpectedly. After a full investigation, these deaths may be diagnosed as suffocation, entrapment, infection, ingestion, metabolic diseases, cardiac arrhythmias, trauma (accidental or non-accidental) or Sudden Infant Death Syndrome (SIDS). SIDS is the sudden, unexplained death of a baby younger than 1 year of age that doesn't have a known cause even after a complete investigation. This investigation includes performing a complete autopsy, examining the death scene, and reviewing the clinical history.

<https://safetosleep.nichd.nih.gov/safesleepbasics/faq>

Here are common myths and facts related to SUID, SIDS, and creating a safe sleep environment from the **National Institutes of Health and the Eunice Kennedy Shriver National Institute of Child Health and Human Development.**

*NICHQ Faculty Expert Michael Goodstein, MD, a neonatologist and international safe sleep expert, says helping families understand and follow safe sleep guidelines can reduce the risk of suffocation and SIDS. Goodstein shares below his opinions on creating a safe sleep environment in response to some myths and misconceptions.*



## Myth #1: Babies can “catch” SIDS.

***Fact: A baby cannot catch SIDS. SIDS is not caused by an infection, so it can't be caught or spread.***

“That’s definitely a myth. There are still things that we don’t know about SIDS but there is a lot we do know about SIDS,” said Goodstein. “Our current understanding of SIDS has three parts: a hidden physical abnormality, a high-risk time period, and an environmental danger. The physical problem may be an abnormal heart rhythm or more commonly a problem in the breathing center of the brain. The risk of SIDS is greatest between 1 and 4 months of life and 90 percent of cases occur by 6 months. Environmental risks include soft bedding, loose sheets or blankets, overheating, and sharing a sleep surface. We can control these environmental factors. Putting baby on their back, removing blankets, toys, and pillows in the baby’s sleep area and other safe sleep practices can significantly reduce the risk of SIDS.”

## Myth #2: Cribs cause “crib death” or SIDS.

***Fact: Cribs themselves do not cause SIDS; however, features of the sleep environment—such as a soft sleep surface—can increase the risk of SIDS and other sleep-related causes of infant death. Find out more about what is a safe sleep environment for your baby by visiting <https://safetosleep.nichd.nih.gov/safesleepbasics>***

“This is a common misunderstanding that’s related to the unfortunate fact that for many years we called SIDS ‘crib death’ because that is where the baby was found,” Goodstein explains. “We’ve come a lot further over the years in defining and understanding a SIDS death. We know a surface that’s safe and separate from the parent, but close -- room sharing, not bed sharing -- is best because sharing the bed is a risk factor for SIDS and SUID. In over 50 percent of the deaths, the baby is found in the bed with their parents.

“Use a crib, play yard or bassinet, products that are approved by the Consumer Product Safety Commission, and is deemed a safe surface for the baby. Basically, you want to create a safe environment with nothing in that environment except for the appropriate mattress, a tight-fitting sheet, and the baby. That’s the safest place for the baby.”

### **Myth #3: Babies who sleep on their backs will choke if they spit up or vomit during sleep.**

***Fact: Sleeping babies automatically cough up or swallow fluid that they spit up or vomit—it's a reflex to keep the airway clear. Studies show no increase in the number of deaths from choking among babies who sleep on their backs. In fact, babies who sleep on their backs might clear these fluids better because of the way the body is built.***

"It's understandable why some people misunderstand the dangers of tummy sleeping, especially grandmas who may not have the latest information. They may remember back 30 years or more when putting the baby on their tummy was recommended," recalls Goodstein. "But babies have the same protective mechanism as an adult that allow them to clear the airway. Too often, people mistake coughing and spitting out milk for choking, but they are not – they are clearing their airway."

"Aside from the fact that tummy sleeping does NOT protect your infant from aspiration, it DOES increase the risk of SIDS" says Goodstein. "Babies who are placed to sleep on the tummy or side have TWICE the risk of dying of SIDS compared to babies who sleep on the back. Babies arouse more easily when they are on their back and this is thought to be protective. Tummy sleeping also keeps the baby warmer, trapping heat. Although we don't know why, there is a relationship between overheating and an increased risk of SIDS."

### **Myth #4: SIDS can be prevented.**

***Fact: There is no known way to prevent SIDS, but there are effective ways to reduce the risk of SIDS.***

Dr. Goodstein says that although SIDS is not preventable, parents, caregivers and family members can significantly reduce the risk, and these interventions can prevent other causes of sudden unexpected infant death or SUID. "Suffocations and strangulations are preventable deaths. By following all the safe sleep recommendations, you can prevent these deaths and you will minimize the risk of SIDS."

## **Myth #5: Shots, vaccines, immunizations, and medicines cause SIDS.**

***Fact: Recent evidence suggests that shots for vaccines may have a protective effect against SIDS. All babies should see their health care providers regularly for well-baby checkups and should get their shots on time as recommended by their health care provider.***

“Please make sure your baby gets vaccinated on time. This can be lifesaving. A couple of these vaccines help prevent cancer! And after reviewing the data, the Institute of Medicine in 2003 concluded that vaccines were NOT a cause of SIDS. The most recent studies have repeatedly shown a protective effect of vaccines against SIDS. Although we don’t know why they are protective, we should still take advantage of this benefit for our children. There’s no relationship between getting your baby’s shots and a baby succumbing to SIDS. When you look at the hard data, at the end of the day, vaccines do not cause SIDS, if anything, they have a potentially protective effect.”

## **Myth #6: SIDS can occur in babies at any age.**

***Fact: Babies are at risk of SIDS only until they are 1 year old. Most SIDS deaths occur when babies are between 1 month and 4 months of age. SIDS is not a health concern for babies older than 1 year of age.***

“SIDS can occur any time after birth until the first birthday,” said Goodstein. “There are exceedingly rare instances of babies dying suddenly and unexpectedly after the age of one. The peak period is between 1 and 4 months and deaths are less common after six months. Again, nearly 90 percent of SIDS cases occur in the first six months.”

## **Myth #7: If parents sleep with their babies in the same bed, they will hear any problems and be able to prevent them from happening.**

***Fact: Because SIDS occurs with no warning or symptoms, it is unlikely that any adult will hear a problem and prevent SIDS from occurring.***

## ***Sleeping with a baby in an adult bed increases the risk of suffocation and other sleep-related causes of infant death.***

Instead of bed sharing, health care providers recommend room sharing—keeping baby’s sleep area separate from your sleep area in the same room where you sleep. Room sharing is known to reduce the risk of SIDS and other sleep-related causes of infant death.

“Adult beds may have soft mattresses, pillows, loose sheets and heavy blankets, which are all unsafe for an infant’s sleep environment. Also, when you fall asleep you are unconscious and not completely aware of your surroundings. Most people move around in the bed when they are sleeping. This is not where you want your baby to be when they are sleeping. Sadly, when you are unaware of your movements while sleeping, you can roll up against or roll over on the baby and not realize it.”

In an article on NICHQ’s website, [\*It’s Past Time to Prevent SIDS and Sleep-Related Infant Deaths\*](#), Goodstein talks about the importance of having authentic conversations with parents and families to help all babies sleep safely.

“Handing a family a brochure and telling them to practice safe sleep isn’t enough. Maybe they don’t have space for a crib in their homes; or maybe they believe their baby will be safest in their bed. We need to develop more authentic conversations with families by using techniques like motivational interviewing and asking open-ended questions. When we do this, we can learn about families’ needs, concerns and opinions, and then form an achievable plan together.”

Importantly, these conversations need to have breadth as well as depth. They should extend to all caregivers, especially grandparents who are key influencers in many families, and take place in multiple settings, including prenatal care and during pediatric visits.

**[Resource: Building on Campaigns with Conversations Modules](#)**

## **Myth #8: If a baby product is in a store it is safe for me to buy.**

***Fact: Not all baby products are safe. Read instructions carefully before using any baby product.***

“Just because a product is in a store, or advertised for a child, doesn’t mean that it is safe for the baby, especially in the sleep environment,” explains Goodstein. “And there are tons of products out there, like weighted blankets, bean bags, bumper pads, that can be unsafe. Even products that are considered safe should be used as instructed.”

Car seats are great for use in a vehicle, keeping the baby safe and secure while you’re driving. But once you arrive at your destination, take the baby out of the car seat to avoid suffocation or strangulation risks. Too many children have died when left unattended in a car seat.

*Dr. Goodstein serves as a faculty expert on the National Action Partnership to Promote Safe Sleep Improvement and Innovation Network (NAPPSS-IIN), funded by the Health Resources and Services Administration Maternal and Child Health Bureau. NAPPSS-IIN seeks to make infant safe sleep and breastfeeding the national norm by aligning stakeholders to test safety bundles in multiple care settings to improve the likelihood that infant caregivers and families receive consistent, evidence-based instruction about safe sleep and breastfeeding. Along with NAPPSS-IIN, Dr. Goodstein has been practicing neonatal-perinatal medicine for 27 years at WellSpan York Hospital where he is director of newborn services for the health system. He is a Clinical Professor of Pediatrics at the College of Medicine of The Pennsylvania State University. Dr. Goodstein has been a member of the American Academy of Pediatrics (AAP) Task Force on SIDS since 2010.*

## Resources:

### Safe to Sleep Campaign

<https://safetosleep.nichd.nih.gov/>

### Safe to Sleep Campaign Myths and Facts

<https://safetosleep.nichd.nih.gov/safesleepbasics/mythsfacts>

### American Academy of Pediatrics (AAP) Safe Sleep Recommendations

<https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/safe-sleep/Pages/Safe-Sleep-Recommendations.aspx>

### Center for Disease Control and Prevention (CDC) Safe Sleep Resources

<https://www.cdc.gov/sids/index.htm>

