

# Safe Sleeping for your baby

A baby sleeps a lot.  
At night as well as during the day  
Not only at home, but wherever he is: in a car, during a visit away from home, while travelling.

*Baby sleep can be safe. This survey explains how*

The recommendations are for everybody who cares for a baby. Parents, grandparents, other family members, babysitters, and professionals caring for a baby.

## 1 Always place a baby to sleep on its back

Safest is to place a baby on its back during sleep. The side position is not a stable one, only during the first two weeks a baby may be placed on its side. The prone position should be avoided from early on. Never place a baby to sleep on his abdomen.



Not a single time. Not even to comfort him. There may be reasons to deviate from these recommendations, but don't do this without consulting your doctor.

However, during the day it is good practice to place the waking baby regularly on its tummy, but always under supervision. This position is beneficial for the motor development of the baby.

There is no reason to worry about form changes of baby's head. Form change is generally innocuous and temporary and may be prevented as follows: during breast feeding a baby's head is turned alternatively to the left and to the right. Do the same while bottle feeding. In addition you may alternate the position of the baby or turn the bed in relation to the window, a light source or a plaything drawing his attention.

## 2 Avoid overheating

The baby must be protected from overheating because of too much bedding. The use of a duvet is strongly discouraged before two years of age. Do not clothe the baby too heavily. Clothe your baby in keeping with the weather, central heating, direct sunlight, a car heater etc. Put less bedding than normal on a baby with fever. A bedroom temperature of 16-18 degrees Celsius is recommended.

## 3 Safety measures in cot or bed.

The mattress should be firm. Bed material that is too soft or which may obstruct nose and mouth like pillows, head protectors, duvet or plastic film, may compromise air entry and does not belong in a baby's bed. The bed must be made 'short'; the baby should be put to sleep in the feet to foot position. Use a blanket or better still a well fitted baby sack. If using a padded sack no other bedding is required.

A plain cotton sack may require an addition in the form of a thin blanket. A plain cotton sack with a thin blanket is preferable to a padded one, because tucking in is risk decreasing.

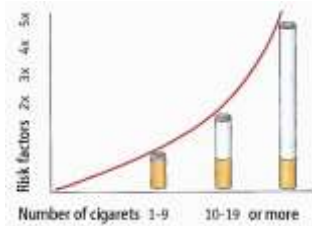


#### 4 Keep your baby within reach

Let your baby if reasonably possible share the bedroom with you, at least during the first six months. Let him sleep not too far removed from you during the daytime, in a quiet sheltered spot. Your natural alertness reduces risk. However, do not take the baby in your bed during sleep. This carries increased risk at least during the first 3 months for non-smoking mothers and 5 months for smokers. When you have taken medication, alcohol or drugs, never take your baby in bed with you.

#### 5 Keep your baby smoke free

No smoking, during pregnancy and afterwards, is best for mother and child. If you can't stop completely try at least to cut down to no more than 5 cigarettes daily. A smoke free house is best. In any case keep the baby room free of smoke and always try to prevent passive smoke inhalation by the baby, also in other surroundings, such as a car. A room may even after 8 hours still have traces of smoke. Air a baby's room regularly, even when you never smoke.



#### 6 Breast feeding preferable, keep a dummy in reserve

There are indications that a dummy reduces risk. This is also the case for breast feeding. A dummy is allowed only when breast feeding has been fully established. If in doubt about the breast feeding put off initiation of dummy use. There are no restrictions for dummy use when the baby is on bottle feeding. Terminate dummy use at the age of one year.

#### 7 Do not use sedative medication.

We know of the risk of some medicines for your baby while the risk of others is suspected. Always consult your doctor for using any medication. When breast feeding the same advice goes for the mother who may pass the drug to the baby by way of her milk. Honey may contain a hazardous bacterium, which can be life threatening until the age of one year.



#### 8 Care for the rest and regular routine

##### of your baby

Babies are very sensitive to a disruption of an established routine. Travel, crowded (family) gatherings, a stay overnight in a strange house (or a camping) and all sorts of unusual events are sure to be picked up by a baby and may easily disturb his well-being. Lack of sleep and, in reaction, an unusually long subsequent sleep period may be the result. Try to avoid such risk increasing situations.

#### 9 Attend the well-baby clinic

Regular visits to the well-baby clinic are highly recommended. It is fun to see how normal growth and development and health are regularly checked.

*Cot death, fortunately, now occurs less and less.*

Nobody can completely avoid the risk, but we can by sensible prevention reduce the risk to a large extent.

*Cot death still occurs mostly in the first year of life.*

It occurs always unexpectedly and almost always during sleep, at night but sometimes also during the day.

*Nobody knows precisely why and how cot death occurs.*

There are no hereditary or special patterns of illness. Epidemiological research has discovered risk factors, which often in combination with each other, may compromise the well-being of a baby. A number of these risk factors may be prevented.

***The risk factors are avoided by following the recommendations above.***

Do not hesitate to ask for medical advice. Always ask for advice when you feel that something is wrong with the baby or when you are in doubt or have questions. For further information you may consult your doctor or the well-baby clinic.

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At website <https://www.ncj.nl/programma-s-producten/preventie-wiegeendood> you can find more information about, safe sleeping, baby products and answers at frequently asked questions.