

THE PREFERRED SLEEP POSITION: ON THE BACK (SUPINE)

In 1992 the American Academy of Pediatrics (AAP) recommended that all healthy infants be positioned for sleep on their backs (supine) or on their sides for the first 6 months of life. In 1996, the AAP recommended the back as being preferred over the side position. In 1992, only 30% of U.S. infants slept on their backs or sides. Now about 75% of U.S. infants sleep supine or on their sides.

RESEARCH LINKING THE PRONE (TUMMY) POSITION AND THE SUDDEN INFANT DEATH SYNDROME

Most infants in the world are put to sleep lying on their backs. In the 1980s, research studies from Europe, Australia, and New Zealand showed that the supine sleep position reduces sudden infant death syndrome (SIDS) 20% to 67%. The prone (or tummy) position has a three to nine times greater risk of SIDS than the supine position. The side position had a two times greater risk of SIDS than the supine position. Although none of these studies was perfect, in 1992 the AAP recommended the supine position because the 6000 to 7000 SIDS deaths each year in the United States. Although this change in sleeping position won't eliminate all SIDS risk factors, it should reduce the number of SIDS deaths.

REASONS THE PRONE (TUMMY) POSITION MIGHT INCREASE THE RISK FOR THE SUDDEN INFANT DEATH SYNDROME

The tummy (prone) position puts pressure on a child's jawbone. As a

result, the airway in the back of the child's mouth becomes narrower. Also, if the child sleeps on a soft surface, the nose and mouth may sink in, causing the child to breathe from a small pocket of stale air. In fact, the increased SIDS rate in countries such as New Zealand may be due not to prone position alone but to placing children prone on sheep skin pads. Everyone now agrees that young infants should never be placed on waterbeds, sheepskin, soft pillows, bean-filled pillows, or other soft, spongy surfaces. Soft surfaces are also potentially dangerous when a child is placed on the crib in the supine (on the back) position because he or she may roll over during the night.

RISKS OR THE SUPINE (BACK) POSITION

The main reason for the earlier recommendation of the prone position was the concern that if a child spits up or vomits while lying on the back, he or she could inhale (aspirate) and choke on the vomited material. However, the AAP has found no evidence to support the belief that choking occurs more commonly in the supine position. Choking is an extremely rare cause of infant death in healthy, full term infants. During the last 4 years, the rate of choking in infants has not increased.

THE EXCEPTIONS: WHEN THE PRONE (TUMMY) POSITION IS RECOMMENDED

The AAP recommends the prone, or tummy, position for infants in the following three categories:

Instructions for Pediatric Patients, 2nd Edition, 1999 by WB Saunders Company. Written by Barton D, Schmidt, MD, pediatrician and author of *Your Child's Health*, Bantam Books, a book for parents.

1. **Infants with complications of gastro esophageal reflux (spitting up).** These complications include recurrent pneumonia from aspiration, choking episodes, interruptions of breathing (apnea) episodes, or acid damage to the lower esophagus (esphagitis). Although spitting up is common, the complication are rare.
2. **Infants with birth defects of the upper airway that interfere with breathing.** Examples are a large tongue, a small mouth, or a floppy larynx.
3. **Premature babies who are having difficulty breathing or require oxygen.** (Research shows that premature babies breathe better in the prone position.) By the time they come home, most premature babies can sleep on their backs.

Any baby who needs to sleep prone must be placed on a firm sleeping surface.

PROME (TUMMY) POSTION FOR PLAYTIME

The back position is recommended for bedtime and naps. It is not necessary if your infant is awake. Yet many parents keep their infant in the back position throughout the day. This can cause some flattening of the back and the head and also some decreased strength of the shoulder muscles. Avoid these side effects by keeping your infant prone for some of his or her playtime and waking hours. In their cribs, babies tend to turn slightly toward the side where they can see people. Therefore,

every week reverse the direction you lay your baby in his or her crib.

SUMMARY

Several years have passed since 1992, when the AAP recommended that infants sleep on their backs. Now over 75% of patents follow this advice. By 1995, national data showed a 30% drop in the SIDS rate. Provide your baby an added margin of safety by placing him on his back for sleep. If you use a child care center, be sure the staff are aware of your preference.

Other ways to reduce the risk of SIDS are to use a firm mattress (avoid soft bedding), breast-feed if possible, and protect your infant form exposure to cigarette, cigar, or pipe smoke.