

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Rick Scott
Governor

Celeste Philip, MD, MPH
Surgeon General and Secretary

Vision: To be the Healthiest State in the Nation

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Dear Colleague:

I am requesting your assistance in addressing one of the greatest threats to children in the state of Florida. Unsafe sleep practices continue to be the leading cause of preventable death in infants. In 2016, there were 85 such deaths in Florida,¹ each one a family tragedy and a loss to our society. Nationwide there are approximately 3,500 such deaths each year. As a result, the American Academy of Pediatrics (AAP) recently updated its guidelines for the prevention of Sudden Infant Death Syndrome (SIDS) and other sleep-related infant deaths.² These guidelines encourage all health care providers to endorse and model these risk-reduction recommendations from birth onward. I am asking that you and your staff actively promote these safe sleep recommendations to the families for whom you provide care.

Enclosed is a summary of these evidence-based recommendations. They apply ideally to infants for the whole first year, but for the first six months of life at a minimum. The Florida Department of Health collaborated with community partners to develop patient education materials on safe sleep practices to reinforce the one-on-one counseling you and your staff can provide to parents. An electronic copy of our safe sleep brochure can be accessed at https://www.ounce.org/pdfs/safe_sleep.pdf. Additional resources can be ordered at https://www.ounce.org/order_here.asp.

As a physician, you are a trusted source of information for parents on health and safety. Your influence is extended by the ARNPs, Physician Assistants and other staff members who work with you. Families continually re-examine decisions about how best to care for their infants and often receive conflicting messages from other family members and the media. Safe sleep information is worth repeating at each encounter.

By working together to inform families and caregivers about safe sleep practices, the tragedy of preventable infant death can be significantly reduced. Thank you for joining this effort to protect Florida's future and our most precious new residents.

Sincerely,

Celeste Philip, MD, MPH
Surgeon General and Secretary

Enclosure

Summary of Recommendations for Safe Sleep, based on updated AAP Guidelines

1. Infants should be placed down to sleep on their backs for every sleep episode by every caretaker until they reach 1 year of age. Sleeping on the back has been proven to decrease the risk of sleep-related deaths, and SIDS numbers have plateaued since this was implemented. It does not increase the risk of choking and aspiration, a concern often raised by caregivers and some health care professionals. This applies to pre-term as well as term infants. Sleeping on the side is not safe and is not recommended. It is important that families instruct temporary caregivers that their infant needs to be put down to sleep on their back; especially if they are individuals who raised children prior to this guidance. Once infants are able to roll over in both directions, they can be left in the position they assume.
2. Infants should sleep on a firm sleep surface such as a mattress with a fitted sheet in a safety-approved crib. There should be no loose bedding, blankets, quilts, comforters, sheepskins, pillows or other soft objects in the crib as these present a risk for suffocation. This includes bumper pads that connect to the crib rails and which have been implicated in strangulation and entrapment deaths. Likewise, infants should not be left to sleep on sofas or armchairs, or share this surface with their caregiver during that time. This sleeping arrangement has led to numerous suffocation deaths as a result of the infants' faces becoming wedged in corners, or between the caregiver and sofa.
3. Infants should sleep in the parents' room but on a separate surface, not in the parents' bed. The best way to accomplish this is with a crib or bassinette in the parents' room, near the bed. Bed-sharing with parents, siblings, or pets is a common cause of suffocation and entrapment deaths. When speaking with parents it is a good idea to discuss "room sharing" which is good as opposed to "bed sharing" which is dangerous. The older term "co-sleeping" is discouraged because it is ambiguous and could refer to either practice.
4. Breastfeeding should be encouraged. The American Academy of Pediatrics (AAP), the American Academy of Family Physicians and the American College of Obstetricians and Gynecologists all strongly endorse breastfeeding for its many health benefits which include a measure of protection from SIDS.^{3, 4, 5} All health care providers should actively promote breastfeeding. It is critically important, however, that breastfeeding should not result in the infant and mother sleeping in the same bed. Ideally, this recommendation should be given at the same time breastfeeding is initiated soon after delivery, and reinforced consistently throughout the post-partum hospitalization period. An all-too-common story in infant death cases is the history that the mother fell asleep while breastfeeding and awakened to find the infant dead. This is especially true of infants less than 4 months of age. If parents choose to breastfeed infants less than 4 months of age in bed, they must take care not to fall asleep, and if they do fall asleep, they should place the infant back in their crib or bassinette as soon as they awaken.
5. Parents should be cautioned regarding the use of commercial products that claim to reduce the risk of SIDS or to make it safe to bed-share. Companies may promote various wedges, positioners and other devices to be placed in the parents' bed to separate the infant from others. The American Academy of Pediatrics finds that there is no evidence that these devices reduce the risk of SIDS or suffocation. The AAP, the US Food and Drug Administration and the

Consumer Product Safety Council all concur that manufacturers should not claim that a product or device protects against SIDS unless they have scientific evidence that proves that to be true.

In summary, the safest way for babies to sleep is on their back, alone, on a firm surface free of clutter and soft accessories.

References

1. Florida Child Abuse Death Review Committee Annual Report, December 2017. *Note: Florida Child Abuse Death Review Committee reviews exclusively those child fatalities which have been reported to the Florida Abuse Hotline. Therefore, the total number of sleep-related deaths may exceed the number indicated above.
2. American Academy of Pediatrics Task Force on Sudden Infant Death Syndrome. SIDS and Other Sleep-Related Infant Deaths: Updated 2016 Recommendations for a Safe Sleeping Environment. Pediatrics, November 2016, Volume 138.
3. American Academy of Pediatrics Section on Breastfeeding. Pediatrics, March 2012, Volume 129.
4. American Academy of Family Physicians. AAFP Releases Position Paper on Breastfeeding. American Family Physician, January 1, 2015, Volume 91, Number 1, p.56.
5. American College of Obstetricians and Gynecologists, Committee Opinion 658, reaffirmed 2017. Support for Breastfeeding as Part of Obstetric Practice. Available at <https://www.acog.org/Clinical-Guidance-and-Publications/Committee-Opinions/Committee-on-Obstetric-Practice/Optimizing-Support-for-Breastfeeding-as-Part-of-Obstetric-Practice>