Sudden infant death syndrome

Sudden infant death syndrome (SIDS) is a condition in which a baby dies suddenly while sleeping, and doctors can't find a cause. It's also called cot death. Sudden infant death syndrome isn't common, and it's rare in babies more than 6 months old. But there are some simple things you can do make it even less likely.

We've brought together the best research about cot death and weighed up the evidence about how to reduce the risk. You can use our information to talk to your doctor, nurse, or health visitor, and decide the best way of putting your baby to bed.

What is sudden infant death syndrome?

Sudden infant death syndrome (SIDS or cot death) occurs when a baby under 12 months old dies suddenly for no apparent reason. When doctors do an investigation into the death (a post mortem), they can't find anything that might have been the cause.

Placing babies to sleep on their back reduces the risk of SIDS.
Sudden infant death syndrome (also known as cot death) happens without any warning when a baby is thought to be sleeping. It can occur when a baby is in a cot, but babies can also die when they're sleeping somewhere else, such as in a pram or their parent's arms. [1]

Babies who die of cot death usually die peacefully in their sleep. They show no signs of pain or distress. [1] There aren't any symptoms or warning signs.

Doctors don't know what causes cot death. It's more common in the first four months of a baby's life. [2]

Research has found several things that seem to be linked to babies dying unexpectedly. These are known as risk factors. [3] [4]

- Babies seem to be more at risk if they are placed to sleep on their front. This is the most important factor. It's safer to place your baby to sleep on their back.

- There's also a higher risk of SIDS if the baby's mother or another family member smokes.

Risk factors make cot death more likely. But it's important to realise that having a risk factor doesn't mean cot death will happen. We know only that babies who die of cot death are more likely to have been exposed to these risks.

Avoiding these risk factors can help make cot death less likely. To read more about things you can do, see What helps to reduce the risk of sudden infant death syndrome?

Do I need a monitor?

Some companies sell devices that monitor a baby's breathing. Doctors sometimes suggest using these for babies who have a medical condition that affects their breathing. And they're sometimes given to parents who've lost a baby to cot death and go on to have another child. But there's no evidence that home breathing monitors can reduce the risk of cot death. [5] Doctors don't usually recommend using them.

Where can I get more help?

Parents who have lost a child to cot death need a lot of emotional support. It's completely natural to feel grief, and many parents feel guilty or feel that they should have done something differently.

Counselling, advice, and practical help are available. Your doctor may be able to put you in touch with a support group in your area. Many parents find it helps to talk to other people who've been in the same situation.

You may wish to contact the The Lullaby Trust (formerly the Foundation for the Study of Infant Deaths) ( http://www.lullabytrust.org.uk/ ). If you live in Scotland, you can contact...
the Scottish Cot Death Trust (http://www.scottishcotdeathtrust.org/). Both these charities offer support to parents who’ve lost a baby.

When you visit these websites, please remember that we aren’t responsible for the information published on external sites.

**How common is sudden infant death syndrome?**

Sudden infant death syndrome (cot death) isn't common. [6]

It happens to around 1 in 3,000 babies, according to figures for England and Wales from 2011. [2]

It's rare for cot death to happen twice in the same family. [7] [8] Occasionally, a medical condition that babies inherit may cause more than one baby in a family to die suddenly. [9]

**What helps to reduce the risk of sudden infant death syndrome?**

There are several things you can do to try to reduce the risk of sudden infant death syndrome (cot death).

**Key points about reducing the risk of cot death**

- The most important way of reducing the risk of sudden infant death syndrome (cot death) is to put your baby to bed sleeping on their back.

- Sudden infant death is more common in babies whose mothers smoked when they were pregnant. And being around people who smoke also increases a baby's risk of cot death. If you can't give up smoking, you should at least make sure that no one smokes in the room where your baby is.

- Other things that may help are not letting your baby sleep in your bed, making sure your baby doesn't get too hot, giving your baby a dummy, and keeping soft objects, such as pillows or toys, out of your baby's cot.

- However, these things only reduce the risk of sudden infant death. Nothing can get rid of the risk completely.

You should always take your baby to see a doctor or to hospital if you're worried about their health. But cot death doesn't happen after an illness. There aren't any symptoms or warning signs.

We’ve looked at the research on reducing the risk of cot death. There are things you can do that may help.
Treatment Group 1

Ways to reduce the risk of sudden infant death syndrome

- Place your baby to sleep on their back
- Avoid smoking
- Avoid sharing a bed or sleeping on a sofa with your baby
- Keep your baby's cot in your room for the first six months
- Avoid overheating or overwrapping your baby
- Avoid soft sleeping places
- Breastfeed your baby if possible
- Use a dummy

Treatments:

Place your baby to sleep on their back

In this section

Sudden infant death syndrome is more common among babies who sleep on their front. You should always place your baby to sleep on their back.\(^4\)\(^{10}\)\(^{11}\) Try not to put your baby on their side, as this makes it easier for them to roll onto their front.

At about 5 or 6 months, babies can usually roll over by themselves. You shouldn't stop your baby doing this. It's normal at that age, and the risk of cot death is much lower after your baby is 6 months old.\(^12\)

The research shows that the number of cot deaths has fallen in countries where parents are advised to place their babies to sleep on their back.

- One study looked at the effect of a national advice campaign in Norway on cot deaths. It found that the number of cot deaths reduced from about 2 in 1,000 babies before the campaign to about 1 in 1,000 babies after the campaign.\(^13\)\(^14\)

- Another study looked at the ways parents were placing their babies to sleep before and after an advice campaign. Before the campaign more than 50 in 100 babies were being placed on their front. But less than 5 in 100 babies were sleeping on their front after advice was given to parents.\(^15\)
Sudden infant death syndrome

The studies found no serious side effects when babies sleep on their back. For example, some parents worry that their baby may breathe in vomit or choke while sleeping on their back. But the research found that there was no extra danger.\(^\text{[16]}\) \(^\text{[17]}\)

Occasionally, if a baby sleeps on their back, a flat spot can form on the back of their head.\(^\text{[18]}\) \(^\text{[19]}\) \(^\text{[20]}\) This goes away with time and doesn't cause any problems as far as we know. Varying your baby's head position slightly each time they sleep for the first few weeks of their life may help to prevent the problem. Letting your baby roll around on their tummy while awake also may help.

There's a rare condition in which a flat spot forms and the bones in a baby's skull join together. This is more serious, but it doesn't seem to be any more likely for babies who sleep on their backs.\(^\text{[20]}\)

---

**Avoid smoking**

In this section

Sudden infant death syndrome is more likely if you smoke while you're pregnant.\(^\text{[21]}\) It's also more common in families where someone smokes around the baby.\(^\text{[3]}\)

Lots of studies have found that the number of cot deaths reduced after national campaigns advised parents to avoid smoking around their baby.\(^\text{[13]}\) \(^\text{[14]}\) \(^\text{[22]}\)

For help and advice about stopping smoking, see our information on [Smoking](#).

We don't know exactly how much the advice to avoid smoking reduces the risk of cot death. That's because the national campaigns included advice about other things too. This other advice also may have reduced the number of sudden infant deaths. So we don't know how much of the difference was due to people smoking less.

---

**Avoid sharing a bed or sleeping on a sofa with your baby**

In this section

Sharing a bed with your baby might make sudden infant death syndrome more likely. The safest place for your baby to sleep is in a cot in your bedroom for the first six months.

It's more dangerous to share a bed or sleep on the sofa with your baby if you (or your partner):\(^\text{[11]}\) \(^\text{[23]}\) \(^\text{[24]}\)

- Smoke
- Have been drinking alcohol
- Take a medicine or drugs that make you drowsy
• Feel very tired.

There is a risk you might roll over in your sleep and suffocate your baby. Your baby could also get caught between the wall and the bed, or roll out of bed and be injured. However, in cases of sudden infant death, there's usually no obvious sign that a baby suffocated. So, sharing a bed may increase the risk of death in other ways, apart from the risk of suffocation.

It's also dangerous to sleep with a baby on a sofa or armchair. It's best to be careful in situations where you could fall asleep by accident, such as sitting on a sofa to feed your baby when you're tired.

You shouldn't let your baby sleep alone in an adult bed.

One study looked at how babies slept the night before they died, compared with a typical night's sleep for a healthy baby. About 54 in 100 babies had been sleeping with their parents, either in bed or on a sofa, just before they died. When the researchers interviewed parents with healthy babies, only 20 in 100 said they had shared a bed or sofa when their child last slept. Some of the risk came from the fact that, in many cases, parents had drunk alcohol or taken drugs before going to sleep with their baby.

---

**Keep your baby’s cot in your room for the first six months**

In the UK, official advice says that it’s safest for your baby to sleep in a cot in your room for the first six months.

There hasn’t been any good research yet looking at whether this advice has meant fewer cot deaths. However, when researchers have looked back at cases of cot death, babies who died were more likely to be sleeping in a room on their own.

---

**Avoid overheating or overwrapping your baby**

Sudden infant death syndrome is more likely if a baby gets too hot or is wrapped up in lots of blankets or clothes.

Your baby should be lightly clothed for sleep. The temperature of the bedroom should be comfortable for a lightly clothed adult. Your baby shouldn’t feel hot to touch.

Some research has shown that the number of cot deaths was reduced after national campaigns included advice to parents saying that babies shouldn’t get too hot. The number of deaths was reduced from 1.6 in 1,000 to 0.2 in 1,000 after one campaign.
But advice not to smoke and to put babies to bed on their back was given at the same time. So we can’t say how much of the difference was due to keeping babies cool.

Avoid soft sleeping places

Babies are more likely to die suddenly if they sleep on something soft, such as a pillow or sofa. You shouldn’t place soft materials or objects, such as pillows, quilts, or sheepskins, under your sleeping baby. Your baby should sleep in a cot on a firm mattress.

You should also keep soft objects, such as pillows or soft toys, out of the cot. And you should use a sheet, with blankets if needed, instead of a duvet or quilt. Place your baby’s feet at the foot of their cot with the bedclothes tucked in around the mattress. The covers should only reach the level of your baby’s chest. This will prevent your baby’s head being accidentally covered.

Breastfeed your baby if possible

Sudden infant death syndrome is less common among babies who are breastfed. We don’t know why. But doctors think there are lots of health benefits that come from breastfeeding, as well as a lower risk of cot death. So doctors usually recommend it.

The number of cot deaths has reduced in countries where campaigns have advised mothers to breastfeed. After one campaign, the number of babies dying from cot death reduced from 1.83 in 1,000 to 0.4 in 1,000. But the campaign included other advice as well as the recommendation that women breastfeed. So we don’t know how much of the difference was because of breastfeeding.

Use a dummy

Cot deaths are less common among babies who use a dummy at bedtime. There’s some good research showing a link between using a dummy and fewer cot deaths.

Some people worry that using a dummy may interfere with breastfeeding or cause a child’s teeth to become crooked. But the research shows that these problems tend to be minor and go away in time.

The Lullaby Trust (formerly the Foundation for the Study of Infant Deaths) is a charity that aims to help prevent cot death. It says that settling your baby to sleep with a dummy, even for naps, can reduce the risk of cot death. This is the advice the Trust gives.
Sudden infant death syndrome

- Consider giving your baby a dummy when putting them to bed or when they have a nap.
- If the dummy falls out of your baby's mouth once they're asleep, don't put it back in.
- If your baby doesn't seem to want the dummy, don't force them.
- Don't coat the dummy in a sweet liquid.
- If your baby is breastfeeding, don't give them a dummy until they're 1 month old.
- Try to wean your baby off their pacifier by the age of 1 year.

It's also a good idea to clean and replace dummies regularly.

Further informations:

Sources for the information on this leaflet:


This information is aimed at a UK patient audience. This information however does not replace medical advice. If you have a medical problem please see your doctor. Please see our full Conditions of Use for this content. For more information about this condition and sources of the information contained in this leaflet please visit the Best Health website, http://besthealth.bmj.com. These leaflets are reviewed annually.