LA LECHE LEAGUE INTERNATIONAL APPLAUDS AMERICAN ACADEMY OF PEDIATRIC’S UPDATED INFANT SLEEP POLICY

RALEIGH, North Carolina (January 10, 2017) — The American Academy of Pediatrics (AAP) and La Leche League International (LLLI) both have long histories of providing research-based information to breastfeeding mothers and their families — the AAP through its guidelines and recommendations, and LLLI through mother-to-mother support and publications. The AAP’s revised policy statement, “SIDS and Other Sleep-Related Infant Deaths: Updated 2016 Recommendations for a Safe Infant Sleeping Environment,” is its latest update on safe infant sleep, reinforcing many earlier recommendations, adjusting others in light of new information, and bringing the two organizations into closer alignment.

The 2016 AAP update renews its emphasis on keeping the baby in the parents’ room at night for at least the first six months. LLLI agrees that it is an important reminder to new parents that even a carefully-prepared nursery poses a risk to young babies who rely on responsive adults for their safety and wellbeing.

The revised policy states more clearly that their recommendation against bedsharing is for infants younger than four months, which is an important clarification often missed by parents and healthcare providers.

LLLI particularly applauds the AAP for recognizing the need for a safe place for drowsy nighttime breastfeeding sessions since hormones released during breastfeeding can make a mother sleepy: “Evidence suggests that it is less hazardous to fall asleep with the infant in the adult bed than on a sofa or armchair, should the parent fall asleep.”

The new AAP guideline protects both babies and breastfeeding. Studies find that when parents have to get up several times during the night, exhaustion can lead to strategies that threaten breastfeeding, such as formula supplementation, sleep training, and moving the baby’s bed out of hearing range.

This updated policy also recognizes that breastfeeding and bottle-feeding behaviors are different and have different risk factors. Breastfeeding mothers and babies have unique protective behaviors during bedsharing. They automatically assume a position — baby near breast, mother’s arm and leg providing a sheltering “cove” as she lies on her side — that protects against suffocation risks. Bottle-feeding mothers tend to place their baby higher in the bed, near or on the pillows, which is not in that protective cove and thus increases suffocation risk. The breastfeeding mother also tends to rouse frequently, often without realizing it, to feed and monitor the baby’s position, temperature, and condition. These automatic behaviors are not routinely seen with bottle-feeding.

Studies disagree on whether or not keeping the baby in the bed increases Sudden Infant Death Syndrome (SIDS) risk. However, there is evidence that the suffocation risk on a properly prepared adult mattress without gaps or excess bedding poses no greater than the suffocation risk of a properly prepared crib. There is also agreement that weaning from the breast (lack of breastfeeding) is linked to an increased risk of SIDS, and studies indicate that bedsharing is strongly associated with breastfeeding.
LLLI encourages the AAP to shift the prioritization of SIDS risk factors from sleep location to smoking. As in previous versions of this policy, the AAP’s focus on infant sleep location for infant death risk reduction implies that this factor is the greatest risk for SIDS. However, studies have clearly shown that smoking, especially prenatally, is a much greater risk for SIDS than bedsharing.

To make informed decisions about infant sleep location, parents deserve a full understanding of relative risks and benefits. LLLI’s panel of experts has rigorously reviewed research from many disciplines, including maternal and infant behaviors and health, and the biological normalcy and importance of mother-baby contact throughout each day and night. Its panel has concluded that when the following conditions are met, a baby’s risk of SIDS is no greater during bedsharing than in a crib, and suffocations risks are hugely reduced. These criteria offer a simple framework to help all families evaluate and modify their baby’s nighttime risk.

- **The mother** is non-smoking, unimpaired by alcohol or drugs, and breastfeeds.
- **The baby** is full-term, healthy, on his back when not feeding, not overheated, and has his head uncovered and his limbs free.
- **The sleep surface** is firm and free of suffocation risks.

Breastfeeding babies are already at a low risk for SIDS, and breastfeeding behaviors help protect against suffocation risks. The precautions listed above provide still more protection. Because any parent can fall asleep during nighttime feedings, LLLI and the AAP agree that responsible child-proofing includes making every parent’s bed as safe as possible, regardless of how and where a family plans to feed the baby.

**About La Leche League International**

La Leche League began as a small breastfeeding support group near Chicago in 1956. It has become the world’s leading breastfeeding advocacy organization. La Leche League International’s mission is to help mothers worldwide to breastfeed through mother-to-mother support, encouragement, information, and education, and to promote a better understanding of breastfeeding as an important element in the healthy development of the baby and mother.

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