Cosleeping and Your Baby

The image of a baby and parent dozing off together isn't an uncommon one. But the practice of cosleeping, or sharing a bed with your infant, is controversial in the United States. Supporters of cosleeping believe that a parent's bed is just where an infant belongs. But is it safe?

Why Do Some People Choose to Cosleep?
Cosleeping supporters believe - and there are some studies to support their beliefs - that cosleeping:

- encourages breastfeeding by making nighttime breastfeeding more convenient
- makes it easier for a nursing mother to get her sleep cycle in sync with her baby's
- helps babies fall asleep more easily, especially during their first few months and when they wake up in the middle of the night
- helps babies get more nighttime sleep (because they awaken more frequently with shorter duration of feeds, which can add up to a greater amount of sleep throughout the night)
- helps parents who are separated from their babies during the day regain the closeness with their infant that they feel they missed

But do the risks of cosleeping outweigh the benefits?

Is Cosleeping Safe?
Despite the possible pros, the U.S. Consumer Product Safety Commission (CPSC) warns parents not to place their infants to sleep in adult beds, stating that the practice puts babies at risk of suffocation and strangulation. And the American Academy of Pediatrics (AAP) is in agreement with the CPSC.

Cosleeping is a widespread practice in many non-Western cultures. However, differences in mattresses, bedding, and other cultural practices may account for the lower risk in these countries as compared to the United States.

According to the CPSC, at least 515 deaths were linked to infants and toddlers sleeping in adult beds from January 1990 to December 1997. More than 75% of those deaths involved infants who were under 3 months old. Between January 1999 and December 2001, the CPSC reported that more than 100 children under the age of 2 years (98% were less than 1 year old) died after being placed to sleep on an adult bed.

The CPSC identifies four primary hazards of infants sleeping in an adult bed:

- suffocation caused by an adult rolling on top of or next to a baby
- suffocation when an infant gets trapped or wedged between a mattress and headboard, nightstand, wall, or other rigid object
- suffocation resulting from a baby being face down on a waterbed, a regular mattress, or on soft bedding such as pillows, blankets, or quilts
strangulation in a headboard or footboard that allows part of an infant's body to pass through an area while trapping the baby's head

Despite these potential risks, some people dispute the CPSC's findings. Cosleeping advocates say cosleeping isn't inherently dangerous and that the CPSC went too far in recommending that parents never sleep with children under 2 years of age. According to supporters of cosleeping, parents won't roll over onto a baby because they're conscious of the baby's presence - even during sleep.

Those who should not cosleep with an infant, however, include:

- other children - particularly toddlers - because they might not be aware of the baby's presence
- parents who are under the influence of alcohol or any drug because that could diminish their awareness of the baby
- parents who smoke because the risk of sudden infant death syndrome (SIDS) is greater

But can cosleeping cause SIDS? The connection between cosleeping and SIDS is unclear and research is ongoing. Some cosleeping researchers have suggested that it can reduce the risk of SIDS because cosleeping parents and babies tend to wake up more often throughout the night. However, the AAP reports that some studies suggest that, under certain conditions, cosleeping may increase the risk of SIDS, especially cosleeping environments involving mothers who smoke.

In addition to the potential safety risks, sharing a bed with a baby can sometimes prevent parents from getting a good night's sleep. And infants who cosleep can learn to associate sleep with being close to a parent in the parent's bed, which may become a problem at naptime or when the infant needs to go to sleep before the parent is ready.

Making Cosleeping as Safe as Possible

If you do choose to share your bed with your baby, make sure to follow these precautions:

- **Always** place your baby on his or her back to sleep to reduce the risk of SIDS.
- **Always** leave your child's head uncovered while sleeping.
- Make sure your bed's headboard and footboard don't have openings or cutouts that could trap your baby's head.
- Make sure your mattress fits snugly in the bed frame, so that your baby won't become trapped in between the frame and the mattress.
- Don't place a baby to sleep in an adult bed alone.
- Don't use pillows, comforters, quilts, and other soft or plush items on the bed.
- Don't drink or use medications or drugs that may keep you from waking and may cause you to roll over on and therefore suffocate your baby.
- Don't place your bed near draperies or blinds where your child could be strangled by cords.

Transitioning Out of the Parent's Bed

Most medical experts say the safest place to put an infant to sleep is in a crib that
meets current standards and has no soft bedding. But if you've chosen to cosleep with your little one and would like to stop, talk to your child's doctor about making a plan for when your baby will sleep in a crib.

Transitioning to the crib by 6 months is usually easier - for both parents and baby - before the habit is ingrained and other developmental issues (such as separation anxiety) come into play. Eventually, though, the cosleeping routine will likely be broken at some point, either naturally because the child wants to or by the parents' choice.

But there are ways that you can still keep your little one close by, just not in your bed. You could:

- Put a bassinet, play yard, or crib next to your bed. This can help you maintain that desired closeness, which can be especially important if you're breastfeeding.
- Invest in a device that looks like a bassinet or play yard missing one side and attaches to your bed, allowing you to be next each other while eliminating the possibility of rolling over onto your infant.

Of course, where your child sleeps - whether it's in your bed or a crib - is a personal decision. As you're weighing the pros and cons, talk to your child's doctor about the risks, possible personal benefits, and your family's own sleeping arrangements.

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