

# Safer Sleep Advice for Premature & Low Birth Weight Babies



Babies who are born prematurely (before 37 weeks) or who weighed less than 5.5lbs (2.5kgs) at birth have a greater chance of sudden infant death syndrome (SIDS, sometimes called cot death). It is even more important that safer sleep advice is followed if your baby was born prematurely or was a low birth weight. 50% of twins and triplets are born before 37 weeks, the safer sleep advice in this booklet also applies to twins and multiples born prematurely or of low birth weight.

We do not know what causes SIDS. However, we do know you can greatly lower the chance of SIDS by following all safer sleep advice.

**Safer sleep advice is for babies up to one year old. If your baby was born prematurely, then to reduce your baby's risk of SIDS you should follow all safer sleep advice for a year from their due date rather than when they were born.**

## Preparing to come home

Babies in neonatal units are under constant supervision and how your baby sleeps in hospital can be different to how they should sleep at home. In neonatal units babies may sleep on their fronts, wear hats, or have rolled-up towels in their incubator, keeping them in one position.

However, before going home, the neonatal unit should get your baby used to sleeping on their back on a firm, flat mattress (not in a nest or pod). The cot should also be kept clear of towels, pillows or duvets, cot bumpers, soft toys, loose bedding, and products (such as wedges, straps, pods or nests) that will keep your baby in one sleeping position. You only need sheets, a blanket or a baby sleeping bag. If you choose to use a baby sleeping bag, ensure it is the correct fit, that baby cannot slip inside and is the correct tog for the room temperature. Your baby should be 8.8lbs or 4kg before you use a sleeping bag.



# Back to Sleep

The safest place for your baby to sleep for the first 6 months is in a separate cot or Moses basket in the same room as you.

Some babies who were born very prematurely and have spent some time in a neonatal unit may have been sleeping on their fronts for medical reasons. Babies may find it hard to get used to a new sleeping position at first, but keep putting your baby onto their back and speak to your health visitor, neonatal outreach team or GP if you are worried about how they are coping with this. When you get home you should not place your baby on their front or use any type of equipment or rolled up blankets to keep them in one position, unless you have been told to do so by your baby's doctor because of a medical condition.

Babies who need to be given oxygen at home should sleep on their backs. You may have been told to increase the amount of oxygen if they are on their back instead of their front but this is still the safest way for them to sleep.

## Hats

Premature babies on neonatal units often sleep with hats on. Once your baby comes home they do not need to wear a hat indoors. Wearing a hat means your baby can't release heat. The chance of SIDS is higher in babies who get too hot.



## Slings & Baby-Carrier Safety

Babies that are born premature or of low birth weight are particularly vulnerable to SIDS so it is very important, if you choose to use a sling or baby-carrier, that you follow the TICKS guidelines:



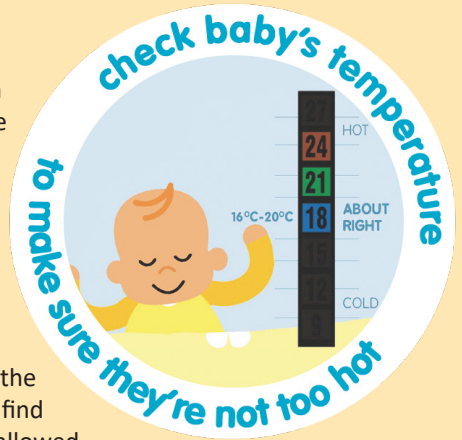
- T**ight
- I**n view at all times
- C**lose enough to kiss
- K**eep chin off the chest
- S**upported back

This is to ensure that your baby's airway is kept clear, and so you can check that they are able to breathe easily and are not overheating.

# Temperature

If a baby gets too hot, their chance of SIDS can increase. Although it is important to make sure that a baby does not get too cold, if a baby is wearing lots of layers or the room is too warm they can get too hot.

A nursery thermometer will help you to make sure every room where your baby sleeps is a safe temperature. Keep the temperature between 16 and 20°C. This will be cooler than the neonatal unit. Babies on a neonatal unit often find it harder to keep warm. Your baby will not be allowed to go home until they can maintain their own temperature.



Check your baby regularly to make sure that they're not too hot or cold. You can do this by feeling the back of their neck or chest. Don't use baby's hands or feet as it is normal for them to feel colder than the rest of their body. It is also important to make sure that your baby's head is uncovered while they are sleeping, so take off hats indoors.

To check your baby's temperature, use a digital thermometer and place this under their armpit. A normal temperature in babies and children is about 36.4°C (97.5F), but this can vary slightly. A fever is usually considered to be a temperature of 38°C (100.4F) or above.

If your baby is too hot, take some layers off and check again. If your baby is too cold, add more layers. If they seem unwell, or don't warm up if cold, phone your doctor. If you get an answerphone message, call the number given on the message or call NHS 111. Call 999 if your baby is in difficulty or in an emergency.

You may also find our Baby Check app useful. Baby check is an app that helps parents decide whether their baby needs to see a doctor. Download for free via the Apple App Store, Google Play or visit [www.lullabytrust.org.uk/safer-sleep-advice/baby-check-app/](http://www.lullabytrust.org.uk/safer-sleep-advice/baby-check-app/) for more information.

# Car seats / Transportation

Having a car seat for your baby is a legal requirement when travelling, even if you are only going from the hospital to home. You need to make sure the car seat you have fits both your car and your baby, particularly if your baby is still small when they leave the hospital.

It is a good idea to check with the staff on the neonatal unit if they think it is safe for your baby to travel home in a car seat. Your baby may have a 'car seat challenge' before they leave the unit. This is a test to check if they fit properly in their car seat.

Many car seats don't allow baby to lie flat, which can mean that their head may flop down making it harder for them to breathe easily. Therefore, babies should not stay in a car seat for long periods.

On longer journeys, give your baby regular breaks to take them out of the car seat. If possible have an adult sit with the baby in the back of the car, or use a mirror so you are able to keep an eye on them. Babies should only be in car seats when travelling in a car and for no longer than two hours; ideally much less for premature babies. To prevent overheating and to keep baby's airway clear, when they are not travelling in a car, take them out of the car seat and place them on a firm, flat surface such as a cot, moses basket or carrycot.

## Smoking

Smoking both during pregnancy and after your baby is born greatly increases the risk of SIDS. Quitting smoking is one of the most important things you can do for your baby. You should also keep your baby out of smoky areas and don't let people smoke near your baby. Keep your home, car and other places your baby spends time smoke-free. For advice and support from the NHS Smokefree campaign call 0300 123 1044 or visit [nhs.uk/smokefree](https://www.nhs.uk/smokefree).

## Reflux

It may be best to talk to your health visitor or GP if you are worried about your baby's health or crying. Sometimes your doctor will give medication for reflux. Babies with reflux should still sleep flat on their backs.

# Co-sleeping

Research has shown that babies who were born prematurely or at a low birth weight have a significantly higher chance of SIDS if they share a bed, chair or sofa with a sleeping adult when they are asleep. Co-sleeping with a premature or low birth weight baby is therefore not recommended at all. This guidance applies for a year from your baby's due date. It is important to keep your baby's bed in the same room as you for at least 6 months or 6 months past baby's due date if they were premature, so you might want to think about what sort of cot, crib or Moses basket would help you keep your baby close. It's a good idea to be prepared for when you are really tired so that your baby has a separate, safe sleeping place.

# Breastfeeding

Breastfeeding has been shown to significantly lower the risk of SIDS. Breastfeeding for even a few days is better than none but most authorities recommend that babies be exclusively breastfed for at least six months. The Department of Health also recommends that breastfeeding is continued, with the addition of appropriate weaning foods, for as long as the mother and baby want.

Premature babies are at greater risk of infection. Breastmilk protects your baby from many infections and diseases. It has been shown that breastfeeding your baby all the time will lower the chance of infection or SIDS. But by breastfeeding even some of the time, you can help reduce the risk of SIDS.

Breastfeeding can be hard and sometimes it isn't possible to breastfeed directly if your baby was born early. You could try expressing your breastmilk using a pump. If you are struggling you can talk to your midwife or health visitor and they will support you.

You can find further advice in this [booklet \(https://www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2015/08/neonatal\\_leaflet\\_online.pdf\)](https://www.unicef.org.uk/babyfriendly/wp-content/uploads/sites/2/2015/08/neonatal_leaflet_online.pdf). The colostrum (first milk produced in the first days after giving birth) contains the most infection fighting antibodies. The neonatal team can help work out how this can be given to your baby.

While skin to skin has many benefits including helping you to bond with your baby, as your baby was premature and/or a low birth weight, this should only be done when you are awake.



# Twins, triplets or more

Premature or low birth-weight multiples are often slept closely together on the neonatal unit to be like when they were in the womb, and help them develop important things like heart rate and breathing.

At The Lullaby Trust, we suggest co-bedding twins, triplets and more in the same cot. This means that you can share a room with them, if you don't have enough space for multiple cots. Sharing a room with your babies is a really important step you can take to reduce the chance of SIDS.

For more information read the [Twins Trust factsheet on safer sleeping](#).

However, there are other reasons you might want to co-bed your twins, or triplets/ multiples that you might want to look into. Some research suggests that putting twins or multiples in the same cot can help them regulate their body temperatures and sleep cycles, and can soothe them.

## Things to know about co-bedding multiple babies:

- Only place them side-by-side in a cot in the early weeks, when they can't roll over or onto each other. Make sure they are not close enough to touch and block each other's breathing.
- Don't use rolled up towels, pillows or anything else between their bodies and heads and the use of cot dividers is not recommended. These can be dangerous for your babies.
- It might be good to start sleeping them at opposite ends of their cot from the beginning - this means they'll both be in the 'feet to foot' position (feet against the foot of the cot) with their own bedding firmly tucked in. Baby sleeping bags are a good option once baby's weight reaches 8.8lbs or 4kg.
- Once **ANY** of your babies have learnt to roll, you should move them to their own cot. This is to stop one baby from blocking the breathing of the other, or causing an accident.
- We would not advise placing your twins, triplets and more in the same Moses basket, even when they are very small. This is to make sure they don't overheat or block each other's breathing, which can increase the chance of SIDS.





**FOR MORE INFORMATION VISIT  
WWW.LULLABYTRUST.ORG.UK  
OR CALL OUR FREE INFO LINE: 0808 802 6869**

## **OTHER USEFUL CONTACTS**

### **Bliss**

The leading UK charity for babies born premature or sick

**www.bliss.org.uk**

**Email: hello@bliss.org.uk**

### **Twins Trust**

The only UK-wide charity dedicated to improving the lives and wellbeing of families with twins, triplets or more.

**www.twinstrust.org**

**Email: enquiries@twinstrust.org**

The Lullaby Trust  
Registered charity no: 262191

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