



Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Babies Sharing Their Mothers' Bed While in Hospital Guideline

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| Brief Summary of Document: | Guideline on babies sharing their mothers bed whilst in hospital |
| Scope | |

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| To be read in conjunction with: | |
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| Reviews and updates | | |
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Glossary of terms

| Term | Definition |
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| Keywords | Babies sharing bed with mothers |
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1. INTRODUCTION

Successful breastfeeding and better sleep are more common among mothers and babies who sleep in the same bed. However, there is also a link between sudden death and bed-sharing if the parents are smokers or if other risk factors are present. Evidence suggests that bed-sharing is common among parents with new babies after discharge from hospital. This guideline is therefore offered so that hospitals can:

- Allow mothers and healthy babies to derive the benefits of bed-sharing in hospital (provided that it is not contraindicated)
- Provide parents with accurate information about the benefits of and contra-indications to bed sharing.
- Increase the likelihood of appropriate and safe bed sharing once mothers and babies return home.

2. DEFINITION

Babies sharing their mothers' bed in hospital either to breastfeed, receive comfort and warmth or to sleep.

3. RATIONALE

Bed-sharing is associated with longer and more restful infant and maternal sleep (1, 2). It is also associated with successful breastfeeding (3, 4). Babies who share a bed with their mother tend to feed more frequently and are more likely to be breastfeeding at three months of age (4). Bed-sharing is also prevalent among parents with new babies after discharge from hospital (5). However, there is also an association between sudden infant death and bed-sharing if the parents are smokers or have impaired consciousness e.g through exceptional tiredness, drug taking or alcohol consumption (6). Sudden infant death is also associated with overheating, sleeping prone and the head becoming inadvertently covered (7). Therefore, this policy is intended to allow mothers and healthy babies to derive the benefits of bed-sharing in hospital and at home, while protecting both mother and infant safety.

4. OBJECTIVES

The objectives of this guideline are:

1. To ensure a safe environment for mothers and babies
2. To provide support and guidance to parents to allow them to make fully informed choices
3. To encourage successful breastfeeding
4. To facilitate the successful implementation of the WHO/UNICEF Baby Friendly Initiative best practice standards for breastfeeding (8)
5. To be sensitive to the emotional and physical needs of the mother and her family
6. To ensure that parents have all the information required to enable them to bed share safely with their baby in hospital.

5. INDICATIONS

- Mother's request
- Babies who wish to breastfeed frequently
- Babies who are unsettled

6. CONTRA-INDICATIONS

- Mothers who are smokers
- Mothers who are sedated (e.g. following analgesia with a sedative effect or following a general anaesthetic or if mother is a known drug misuser)

- Mothers who are otherwise unusually tired (e.g. after a long, difficult labour) to a point where they may find it difficult to respond to their baby
- Mothers with any condition which could alter consciousness e.g. epilepsy, unstable diabetes
- Mothers with any other condition which could make her less aware of or less able to respond to her baby
- Mothers who are very obese
- Maternal or infant pyrexia
- Any sign of illness in the mother
- Any sign of illness in the baby

The risk of bedsharing are also increased if your baby:

- Was premature (born before 37 weeks)
- Was of low birth weight (less than 2.5 kgs or 5.5 lbs)

7. CAUTION

There is evidence to suggest that breastfeeding mothers sleep facing their babies. However, the evidence suggests (11) mothers who are bottle feeding can sometimes turn their backs on their babies once they have fallen to sleep. Therefore, it is probably safest to advise bottle feeding mothers to share a bed for comforting and settling, but to put the baby back in the cot before going to sleep, as at present it is unknown whether teaching safe sleeping positions to bottle feeding mothers is feasible and effective(9).

8. GUIDELINE

- Discuss the benefits of and contra-indications to bed-sharing with the mother to allow her to make a fully informed choice (this can also be addressed antenatally). Ensure she has the leaflet 'Caring for your baby at night' (10)
- If mother is using a duvet, remove and replace with cotton sheets and blankets. Ensure pillows are kept well clear of the baby.
- Discuss the benefits of skin-to-skin contact with mother. Facilitate skin contact by undressing the baby and assisting with the mother's clothing as appropriate. Note: babies should never be swaddled in wraps or blankets when sharing a bed with their mother.
- Ensure the baby is attaching well to the breast (see breastfeeding guidelines *where these exist*).
- Discuss appropriate sleeping positions – see the leaflet 'Caring for your baby at night' (10).
- Take measures to ensure that the baby is protected from falling out of bed.
- Ensure the mother has easy access to the call system in case of difficulty getting out of bed.
- Check the well-being of the mother and baby every 30 minutes in order to ensure that baby's head is uncovered, that, if not currently breastfeeding, the baby is in a supine position, and that no other dangers are apparent. There is no need to wake mother or baby if asleep. If concerned, gently lift baby back into his cot.
- When handling care to another member of staff, ensure that they are aware that mother and baby are sharing a bed.
- On discharge from the unit, staff should ensure that all parents have a copy of the leaflet 'Caring for your baby at night' (10) and the following should be discussed with all parents regardless of whether the mother has shared a bed with her baby in hospital:
 - The dangers of bed-sharing if *either* the mother or father is a smoker
 - The dangers of bed-sharing if *either* the mother or father have consumed alcohol or taken drugs, legal or illegal which alter consciousness or cause drowsiness

- The dangers of bed sharing when unusually tired (i.e. to a point where parents would find it difficult to respond to their baby).
- The dangers of sleeping with their baby on a sofa, waterbed, bean bag or a sagging mattress.
- The dangers of letting their baby sleep alone in an adult bed and the ways to reduce the risk of accidents.
- The benefits of bed-sharing to successful breastfeeding
- The benefits of bed-sharing for settling and comforting babies
- The benefits of rooming-in.
- It is important that babies are protected from falling out of the bed in hospital. The bed should always be lowered as far as possible and the bed clothes tucked around mother and baby. Some units use cot sides to prevent the baby falling out of bed. These have proved successful and popular with mothers. However, some cots sides leave a gap between the side and the bed which presents a danger of entrapment. Therefore, care should be taken when choosing the design of the cot side.

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More information about sudden infant death syndrome can be obtained from the Foundation for the Study of Infant Deaths, Artillery House, 11 – 19 Artillery Row, London SW1P 1RT. Tel: 0870 787 0885 Web: www.sids.org.uk/fsid