Evaluating the Effects of Swaddling Infants
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PICOT Question
Is it beneficial and appropriate for infants to be swaddled in the first months of life? This study is significant to nursing practice because it suggests the need to educate parents on the benefits and risks of swaddling. It is also significant for nursing practice because it supports the continuation of swaddling.

Review of Literature
- Swaddling: A Systematic Review
  - (Van Slenve, Engelberts, Boere-Boonekamp, Kuis, Schulpen & L’Hoir, 2007) Level I Evidence
- Spontaneous Arousals in Supine Infants While Swaddled and Unswaddled During Rapid Eye Movement and Quiet Sleep
  - (Gerard, Harris, Thach, 2002) Level 3 Evidence
- The Effects of Swaddling on Oxygen Saturation and Respiratory Rate of Healthy Infants in Mongolia
  - (Narangerel, Pollock, Manaseki-Holland, & Henderson, 2006) Level 2 Evidence
- Minimizing the Risks of Sudden Infant Death Syndrome: To Swaddle or Not to Swaddle?
  - (Richardson, Walker, & Horne, 2009) Level 2 Evidence
- Comparison of Pain Responses of Premature Infants to the Heel Stick Between Containment and Swaddling
  - (Huang, Tung, Kuo, & Chang, 2004) Level 3 Evidence
- Swaddling: A Traditional Care Method Rediscovered
  - (Meyer & Erié, 2011) Level 2 Evidence
- Does Swaddling Influence Developmental Dysplasia of the Hip?: An Experimental Study of the Traditional Straight-Leg Swaddling Model in Neonatal Rats
  - (Wang, Liu, Li, Edmonds, Zhao, Zhang, Zhao, & Wang, 2012) Level 2 Evidence

Method
When looking for literature related to the effects of swaddling, multiple sources provided by the Auburn University Library were used. Most of the information found came from CINAHL, Medline, and HealthSource: Nursing/Academic Edition. Articles from the past ten years were searched by limiting results to publication dates between the years of 2003-2013, as well as solely scholarly articles. The search began with a broad exploration of all clinical trials and eventually led to a search for more specific evidence from randomized control trials and evidence based practice articles. Some of the phrases used in the search included basic phrases like “swaddling,” “the effects of swaddling,” “swaddling and premature infants,” and “to swaddle or not to swaddle.” Another source used was Cochrane for information regarding swaddling in relation to sudden infant death syndrome. Other sources were not used because the information found was either irrelevant or repetitive of the sources already obtained.

Synthesis
The use of swaddling promotes a more quiet sleep, higher sleep efficiency, fewer sleep stage changes, decreased rate of spontaneous waking, reduced total waking time, lower rates of parental stress and parental abuse, decreased risk of shaken baby syndrome, and reduced risk of SIDS. It’s also found that swaddled, supine sleeping infants experience a decrease in arousal during quiet sleep, as well as increased rapid eye movement sleep. Swaddling promotes a comforting environment and leads to lower pain levels. Swaddling does not effect an infant’s oxygen saturation. Contrary to the benefits of swaddling, some studies show that swaddling could lead to an increased risk of developmental hip dysplasia.

Recommendations
- Due to the various benefits that swaddling offers to newborn infants, including self-soothing, and better sleeping patterns, infants should be swaddled during the first period of life. Therefore, these provide evidence for this Grade A recommendation.
- There is a potential risk for developmental dysplasia of the hip in swaddled infants, however there are many benefits to outweigh this risk. Also, other factors, such as breech positioning, congenital muscular torticollis, or positive family history of hip dysplasia are greater risk factors for hip dysplasia than swaddling. Therefore, the suggestion to avoid the traditional use of swaddling receives a Grade D.

APA Reference List:

Discussion
To improve the evidence based research on the topic of swaddling, more research would help solidify one’s decision on the promotion of safe swaddling. More research is needed concerning developmental hip dysplasia and also sudden infant death syndrome due to contradictory studies. Research confirms that babies need to be placed supine when being put to sleep. It is evident that education to a parent is necessary for swaddling to be effective and safe.