



NATIONAL CENTER FOR HEALTH RESEARCH

The Voice For Prevention, Treatment And Policy

National Center for Health Research's Public Comments on CPSC Forum on Crib Bumpers [CPSC-2019-0033]

The National Center for Health Research appreciates the opportunity to provide comments to the Consumer Product Safety Commission (CPSC) on their proposed rule regarding crib bumpers. The National Center for Health Research is a nonprofit think tank that conducts, analyzes, and scrutinizes research, policies, and programs on a range of issues related to health and safety. We do not accept funding from companies that make products that are the subject of our work, so we have no conflicts of interest.

Crib bumpers have not been demonstrated to provide a meaningful benefit to infants or their caregivers. We agree with the American Academy of Pediatrics that, “crib bumpers are decorative only; they do not serve any safety purpose whatsoever.”¹ Crib bumpers were originally designed to prevent an infant’s head or limbs from becoming entrapped between the crib slats. However, under current safety standards, crib slats are now placed closer together, so crib bumpers are not needed to prevent head entrapment. As a CPSC report noted, “limb entrapments do happen, but they are minor injuries and they overwhelmingly occur to children who are too old to be using bumpers anyway.”² There is no evidence that crib bumpers protect infants from trapping their head or limbs in between crib slats.

On the other hand, the risks from crib bumpers are substantial. Crib bumpers put babies at risk for suffocation, entrapment, and strangulation. Consumer, safety, and health care organizations all agree that a baby sleeps safest alone on their back in a bare crib that meets current safety standards (“Bare is Best”).

The proposed rule would prevent the sale of crib bumpers that pose a three-fold increase in the risk of Sudden Infant Death Syndrome (SIDS). SIDS is one of the greatest fears of parents in the U.S. Since crib bumpers offer no benefit to babies, any increase in the risk of SIDS, suffocation, entrapment, or entanglement is unacceptable. How would one justify a 2-fold increase in SIDS, or even a 50% increase in SIDS? There is no benefit, so why should risk of death be considered acceptable?

CPSC commissioners advised the public to discontinue the use of padded crib bumpers.³ However, crib bumpers are widely available in stores and online, and when parents, friends, and family are buying baby gifts they assume the bumpers must be safe because otherwise, why would they be allowed to be sold? Consumers are likely to be told by sales staff or to assume that product compliance with CPSC safety standards implies that the crib bumper is safe. In fact, it seems likely that updated safety standards would be considered proof that the bumpers are safe, rather than proof that the bumpers are less than 3 times more likely to cause SIDS. Inevitably, keeping crib bumpers on the market sends mixed messages to parents and caregivers. Simultaneously discouraging parents from purchasing crib bumpers while allowing the sale of these products, in any form, sends conflicting signals to caregivers and that endangers infants.

The CPSC should ban crib bumpers, because that will save lives. If CPSC does not implement a crib bumper ban, at the very least the CPSC should include language in the rule that explicitly protects state crib bumper bans. Maryland, Ohio, and New York have passed laws to protect babies in their state by banning the sale of crib bumpers.

The Bottom Line: Crib bumpers have no health or safety benefit and pose serious and significant risks. Continuing to allow the sale of these dangerous products misleads caregivers and puts infants in unnecessary danger. The National Center for Health Research urges CPSC to ban all crib bumpers.

National Center for Health Research can be reached at info@center4research.org or at (202) 223-4000.

References

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