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By Korin Miller

Exactly How Crucial Are These High-Tech Baby-Monitoring Devices?

For starters, pediatricians don't recommend them.

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It seems like everyone and their dog has an activity tracker these days. And if you have a **baby**, you've probably also heard about baby wearables like **Owlet Smart Sock**, a \$299.99 bootie that also tracks your baby's heart rate and oxygen levels while they sleep—and can alert parents if something seems off. Although it may seem excessive to some, others swear that using the devices gives them peace of mind when their baby is young and especially vulnerable. And, in a viral Facebook post, one dad says the Owlet helped save his son's life.

According to Ryan Golinski's **post**, he and his fiancé Kate bought the Owlet before their son Bryce was born in early July. Recently, they had a "very scary night" after the sock alerted them at 3 A.M. that something was wrong. "We thought [it] was a false alarm because it said his heart rate was reading 286," Golinski says (the

average infant heart rate for someone Bryce's age is between 70 to 190 beats per minute, according to [the U.S. National Library of Medicine](#) "But three resets later and it was still reading extremely high for an infant."

"We have spent the last 24+ hours at the hospital for something called SVT, and we caught it before any side effects," he continued. According to the Mayo Clinic, [supraventricular tachycardia](#) (or SVT) is an abnormally fast heart rate, which may lead to seizures, [stroke](#), and even death. The symptoms of SVT may be hard to spot in infants, [according to the Mayo Clinic](#), but they can include sweating, poor feeding, pale skin, and a pulse greater than 200 beats per minute. And while it may not be life threatening unless you have other heart conditions, frequent episodes can weaken the heart if left untreated.

"So everything is going well now and his heart is still extremely healthy," Golinski writes. "If we didn't catch it as early as we did with that sock, his heart wouldn't have been able to handle it and we could be dealing with something a lot more serious. I highly recommend new parents invest into this sock, it's well worth the money."

Golinski's story is definitely terrifying for new parents and has been shared over 58,000 times so far. Plus, other parents have recently [taken to the internet](#) to credit the Owlet with saving their newborns' lives. And Owlet isn't the only baby wearable on the market—others claim to do similar things and come with similarly hefty price tags. For instance, the \$99.99 [MonBaby](#) is a button that clips onto a baby's clothes to monitor their breathing and sleeping position. And the \$159.99 [Baby Vida](#) is a little sock-like cloth that keeps track of a baby's heart rate and oxygen level. But how necessary are these wearables, really?

These monitors may be a smart luxury for new parents, but they have limitations.

Although Golinski said that one of the reasons he decided to purchase the Owlet is because it helps prevent SIDS (Sudden Infant Death Syndrome), Owlet's own site disagrees. It contains a [disclaimer](#) that reads, "This device is not intended to cure, treat, or prevent any disease or health condition, including, but not limited to, Sudden Infant Death Syndrome (SIDS)." The disclaimer also states that "Owlet is intended to provide peace of mind. It is not intended to diagnose, treat, mitigate, cure, or prevent any disease or condition."

Similarly, the [MonBaby site](#) says the device "gives peace of mind to anxious parents and improves sleep for the whole family." And

Baby Vida's reminds consumers "it is not a medical device... It's only intended use is to provide additional information to caregivers." But it's hard to ignore the advertising—and parent testimonials—for all of them, which imply that the devices can and will let parents know if something is wrong.

For its part, the **American Academy of Pediatrics** also specifically states that "home cardiorespiratory monitors can be helpful for babies with breathing or heart problems, but they have not been found to reduce the risk of SIDS." Similarly, a paper published in **JAMA** earlier this year argues that "there is no evidence that these consumer infant physiological monitors are life-saving or even accurate, and these products may cause unnecessary fear, uncertainty, and self-doubt in parents." The paper's authors also say that an abnormal reading could cause an overdiagnosis of an infant, which could spark a visit to the ER, followed by unnecessary blood tests and X-rays.

There's no evidence that using these devices regularly can prevent SIDS, Eva Kubiczek-Love, M.D., a pediatrician at the Cleveland Clinic Children's hospital, tells SELF. "It is also extremely important for parents to understand that [these devices] are not FDA-approved medical devices and are not for medical use," she says. And, although the Owlet may be able to track a baby's heart rate and oxygen levels, Dr. Kubiczek-Love says it can't detect **apnea**, which is when a baby stops breathing for 20 or more seconds.

But the good news is that you probably don't need one anyway: "Most babies don't need something like this," Danelle Fisher, M.D., F.A.A.P., chair of pediatrics at Providence Saint John's Health Center in Santa Monica, Calif., tells SELF. "Also, there are no good studies showing that the Owlet or these other monitors are beneficial [outside of the hospital]." On top of that, Dr. Fisher says that readings from these monitors can actually make doctors' jobs harder: If parents come into the ER and say that their baby had a bad reading but the baby seems otherwise healthy, doctors will typically do a series of tests to figure out what's going on. That can be costly and invasive—even if everything seems fine to the doctor. "That's why we're not super eager to say everybody should have this," she says.

And, for the record, Dr. Fisher points out that SVT is an "unbelievably rare event" (she's had two patients with it in 16 years of practice). However, babies with heart problems tend to have other issues that you or your child's pediatrician would easily pick up on like lethargy, difficulty feeding, a bluish skin tone, or gasping.

Even hospital monitors give false readings regularly.

"My concern is with the false alarms," Ashanti Woods, M.D., a pediatrician at Baltimore's Mercy Medical Center, tells SELF. "We have hospital-grade monitors on babies in the NICU and we frequently—every day—get false alarms." When doctors get those readings, they can quickly assess the baby to see if everything is OK, but parents can't, he points out. Even though having this information may calm some parents' worries, "in the back of my mind, I see it potentially increasing a parent's anxiety," Dr. Woods says.

Medical monitors go through a rigorous validation process to test for accuracy and effectiveness, Dr. Woods says, and Owlet points out on its [website](#) that its booties have "not yet been approved by the FDA for use in medical applications."

But Jane Putnam, Owlet's public relations director, tells SELF that "many parents will use the Owlet Smart Sock for several months without ever getting a false alarm." The average user has a red alarm less than once every two months, she adds, and the company has done several rounds of accuracy testing with the same labs and universities that test hospital monitors—and they've had comparable results. "Most of our users have a great experience and rave about the peace of mind they receive," Putnam says.

Of course, there's something to be said for peace of mind.

It's only natural that many parents worry something will happen to their baby while they sleep, and a device that monitors the baby's heart rate can make parents feel more comfortable during the night. Having that comfort might allow parents and babies to get the [sleep](#) they all need. And it could be useful if your baby has a known health issue that may be better managed with the help of a heart rate monitor.

But Dr. Kubiczek-Love says parents should really focus on making sure they're following proven methods from the [American Academy of Pediatrics](#) to help lower their baby's risk of SIDS, such as placing the baby on their back to sleep, using a firm sleep surface covered by a fitted sheet, sharing a room (but not the bed) for at least the first six months, making sure there are no soft objects in the bed, and avoiding the baby's exposure to smoke.

Obviously these devices have helped some parents, and plenty of people love them. If you want one and have the ability to get one (or can put it on your baby registry), Dr. Woods says there's not necessarily any harm in it—just be aware that you might have some false readings here and there. And, if it ends up giving you more anxiety than its taking away, feel free to stick with low-tech

baby socks instead.

SELF has reached out to MonBaby and Baby Vida and we'll update this article if/when we hear back.

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