



RCSI

UNIVERSITY
OF MEDICINE
AND HEALTH
SCIENCES

Royal College of Surgeons in Ireland

repository@rcsi.com

Baby walkers in Europe--time to consider a ban.

AUTHOR(S)

Adrian Murphy, Alf J. Nicholson

CITATION

Murphy, Adrian; Nicholson, Alf J. (2011): Baby walkers in Europe--time to consider a ban.. Royal College of Surgeons in Ireland. Journal contribution. <https://hdl.handle.net/10779/rcsi.10788962.v1>

HANDLE

[10779/rcsi.10788962.v1](https://hdl.handle.net/10779/rcsi.10788962.v1)

LICENCE

[CC BY-NC-ND 4.0](https://creativecommons.org/licenses/by-nc-nd/4.0/)

This work is made available under the above open licence by RCSI and has been printed from <https://repository.rcsi.com>. For more information please contact repository@rcsi.com

URL

https://repository.rcsi.com/articles/journal_contribution/Baby_walkers_in_Europe--time_to_consider_a_ban_/10788962/1

IRISH MEDICAL
ORGANISATION

Established 1867

The Irish Medical Journal

February 2014 Volume 107 Number 2

Home

Instructions for Authors

- About IMJ
- Disclaimer
- Contact IMJ
- Register as Reviewer
- Register As Author
- View IMJ Authors
- View IMJ Volumes
- View Supplement
- Issue Archive 1980-1996
- Subscription Detail 2010

IMJ Search Website Google[Advanced Search](#)**Baby Walkers in Europe – Time to Consider a Ban***Adrian Murphy, AJ Nicholson*

Ir Med J. 2011 Mar;104(3):69.

In countries where baby walkers are used there has long been controversy about their risks and benefits. Baby walkers are a non-essential nursery product made of a seat surrounded by a rigid frame which is set on wheels. Most walkers also have a tray with toys or rattles attached, and many can be compacted for portability. Parents give various reasons for using walkers – to keep the infant quiet and happy, to encourage mobility and provide exercise, and to hold the infant during feeding. In the United Kingdom, baby walkers are used by over 50% of infants¹.

Baby walkers are often used by parents and caregivers for children between 5 to 15 months of age. Most parents have the impression that the baby walker is a safe place to keep children entertained while they attend to other tasks, or they believe the walker will help a baby learn to walk. However, despite their name, baby walkers do not help a child learn to walk, in fact, use of a walker can inhibit walking ability². Babies who used walkers scored lower on locomotive development tests than babies who did not use walkers^{2,3}. Furthermore, use of a baby walker puts a baby at increased risk of injuries, which almost always occur to the head. Given the high rate of injuries combined with their lack of tangible benefit or necessity or useful for child-rearing, and the wide availability of safer alternatives, we question why they are allowed to be sold at all.

In many European countries baby walkers are linked to more injuries than any other type of nursery equipment, causing an unacceptably high number of severe falls, burns and scalds, and poisonings^{4,5}. Injury data from 9 European countries showed that over 90% of baby walker injuries are injuries to the head, with 31% of them causing brain injury, and 35% causing skull injury⁶. Austrian hospital records⁷ show that a baby walker injury severe enough to cause a skull fracture or concussion occurs at least once a week. Research in Wales showed that 25% of babies hospitalised with burns and scalds had been in a baby walker when the injury occurred⁸. Many European expert organisations have called for bans on baby walkers due to the level of risk and injury they pose to children, combined with their lack of tangible benefit or necessity. Their voices are joined by experts in the United States, Australia and New Zealand. Canada has already implemented a total ban on use, possession, and sale of baby walker, with a fine of up to 150,000 Canadian dollars and/or 6 months imprisonment for non-compliance². There are already many safer alternatives to baby walkers on the market, such as play pens and stationary activity centres.

Standards

EN 1273:2005 contains measures to prevent falls down stairs through one of two options: making the walker wide enough that it does not fit through a standard doorframe, or installing an automatic brake mechanism which will activate when one wheel loses contact with the floor. EN 1273:2005 contains measures similar to a standard which was implemented in the United States 11 years ago, where 25,000 baby walker injuries were occurring annually. Shortly after implementation of the American standard, baby walker injuries there reduced by 76%. However, other factors were likely significant in this reduction, including a campaign against baby walker use by the American Academy of Paediatrics, and the huge popularity of a new safer alternative, stationary activity centres (which are like baby walkers, but without wheels⁵). Despite the reduction in stair fall walker injuries, between 4,000 to 5,000 walker injuries are still occurring annually in the United States⁹. It has yet to be seen if the EU standard EN 1273:2005 will be consistently applied in Europe or lead to a significant reduction. Furthermore, it is important to remember that these measures do nothing to prevent the serious injuries caused by pulling down dangerous items or colliding with objects. These continued risks which are unaddressed by standards were among the primary factors that influenced Canada to ban baby walkers completely³.

The Solution?

Our view is that baby walkers do not help babies learn to walk, and serve no beneficial function for children, in fact impeding walking ability rather than aiding it. Babies are at a highly increased risk of head injury, burns and scalds and poisoning while using a baby walker we urge parents and caregivers use safer alternatives to baby walkers and urges health care providers not to promote baby walker use.

A Murphy, AJ Nicholson

RCSI Department of Paediatrics, Children's University Hospital, Temple St, Dublin 1

References

1. Rhodes K, Kendrick D, Collier J. Baby walkers: paediatrician's knowledge, attitudes, and health promotion. *Archiv Dis Child* 2003 ; 88: 1084 – 85.
2. Garrett M, McElroy AM, Staines A. Locomotor milestones and baby walkers: cross-sectional study. *BMJ* 2002; 324: 1494.
3. Health Canada. Review inquiring into the nature and characteristics of baby walkers. June 2007. Available online at: <http://www.hc-sc.gc.ca/cps-spc/child-enfant/equip/walk-marche/overview-apercu.html>.
4. Al-Nouri L, Isami A . Baby walker injuries. *Annals of Tropical Paediatrics* 2006 ; 26 : 67 – 71.
5. Dedoukou X, Spyridopoulos T , et al. Incidence and risk factors of fall injuries among infants: A study in Greece. *Arch Paediatric Adolescent Medicine* 2004 ; 158 : 1002 - 1006.
6. DiLillo D, Damashek A, Peterson L. Maternal use of baby walkers with young children: recent trends and possible alternatives. *Injury Prevention* 2001; 7:223 – 7.
7. Spitzer P .Baby Walker Injuries via online injury surveillance system of the Department of Paediatric and Adolescent Surgery, Medical University Hospital Graz, 2008.
8. Cassell OC, Hubble M, Milling MA, Dickson WA. Baby walkers – still a major cause of infant burns. *Burns* 1997 ; 23 : 451 – 53.
9. American Academy of Pediatrics. Injuries associated with infant walkers. *Pediatrics* 2001 ; 108 : 3 .

Author's Correspondence

No Author Comments

Acknowledgement

No Acknowledgement

Other References

No Other References