# **Children and Sleep**

# Sleep Medicine & Pulmonary Care

#### Why is a good night's sleep so important?

You may not notice when your children are well rested—but you'll certainly know when they're not! When children aren't getting good sleep-either enough sleep or good quality sleep—they become moody and irritable and have a difficult time concentrating or paying attention. They also lose control of their emotions. We've all witnessed the child in the grocery cart who obviously missed his or her morning nap and is unable to calm down. In fact, in children, sleepiness may look like the opposite: it can create overactivity and hyperstimulation. Over time, consistently



poor sleep will take its toll on a child's immune system and developmental growth as well.

#### How do I ensure my children get good quality sleep?

There are many things parents can do to help their children sleep well. The first is to establish a bedtime routine—and stick to it! Children need to learn to fall asleep on their own and to fall back asleep after normal awakenings during the night. Encourage your child to fall asleep independently unless your child is sick or otherwise truly needs your help. Your child's pleading for "Just this once" for a later bedtime, or crawling into bed with you, has a way of becoming a habit. Avoid stimulating activities; do not allow children to watch TV or play video games before bed. Keep the room quiet and at a comfortable, consistent temperature.

While newborns have irregular wake and sleep times, infants start developing sleep patterns around two months of age. It's then time to create a regular bedtime schedule and routine. Babies will continue to take one to four naps a day, with morning naps ceasing naturally around age 18 months and naps ending altogether around age five.

Children of all ages can suffer from sleep problems. Our pediatric sleep service specializes in diagnosing and treating sleep disorders in children and adolescents. These disorders may manifest as excessive daytime sleepiness, learning problems caused by difficulty concentrating or hyperactivity, disturbed or fragmented sleep, sleepwalking, confusional arousals, and snoring or heavy breathing.

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### How do I recognize a sleep disorder in my child?

We all have nights where we don't sleep well and pay for it the following day with fatigue and crankiness. However, there are signs to watch for that may indicate your child should be evaluated for a sleep disorder:

- <u>Nighttime symptoms</u>: Snoring on a regular basis, which may be very light; choking or gasping, or breathing pauses during sleep; restless sleep, a "thrasher"; sweating during sleep; abnormal sleep positions, such as stomach sleeping or with the head extended
- <u>Daytime symptoms</u>: Hard to wake in the morning; tired, irritable; falling asleep at school/at inappropriate times; breathing through the mouth; chronic nasal congestion; frequent ear or sinus infections; morning headaches
- <u>Additional symptoms in younger children</u>: Increased need to nap; acting out—aggression and hyperactivity; short attention span, easily distracted; academic problems

### What kinds of sleep issues or disorders affect children?

Sleep disorders in children can vary from simple to serious, and include night terrors, sleepwalking, obstructive sleep apnea syndrome (OSAS). In older children and teens, sleep disorders often include narcolepsy, insomnia, restless legs syndrome, and OSAS.

If you suspect your child has a sleep disorder, based on the symptoms above, talk to your family doctor. He or she will review your child's medical, family, and psychosocial histories, assess behavior and perform a physical exam. If warranted, your child's doctor may recommend a sleep evaluation by an accredited Sleep Center.

## What is involved in a pediatric sleep evaluation?

A sleep doctor is a board-certified clinician specializing in sleep medicine. He or she will ask you to keep a sleep diary for a few weeks, and possibly videotape your child's sleep. You may then be scheduled for an overnight sleep study, called a polysomnogram. During the exam, we have your child relax and sleep in a home-like setting. We provide a TV, DVD player and a Playstation<sup>®</sup> 3 to help make our young guests feel at home while they are being prepared for their study. You can even bring your child's own pillow and special blanket. A favorite stuffed animal is also welcome, and your child will sleep in his own pajamas. We will attach electrodes and sensors to the skin to monitor and record activity of the brain, muscles and heart; eye movements, breathing patterns and oxygen levels will also be monitored. It is entirely painless!

If the sleep doctor determines that your child has sleep apnea, there are several treatment options to consider: Tonsillectomy and adenoidectomy; orthodontic/dental intervention to expand the jaw and airway space; or continuous Positive Airway Pressure (CPAP) therapy

#### What is CPAP therapy?

Continuous Positive Airway Pressure (CPAP) uses a bedside machine to gently push air through a tube and into a mask worn around your child's nose and/or mouth, to help your child breath normally during sleep. CPAP helps your child get quality, restful sleep at night. While the mask may feel foreign at first, most CPAP users—children included—find they sleep better and after a time, don't want to go to bed without it.

The Sleep Center is fully accredited by the American Academy of Sleep Medicine and meets the most rigorous standards to rank as a center of excellence in the management of sleep disorders.

Source: National Sleep Foundation



### A Note About Teens

The teen years present special challenges when it comes to sleep. Natural patterns shift to a later bedtime, so teens have trouble falling asleep at a reasonable hour—but the alarm still rings early for the school day.



Have you ever watched a teen enjoy an unlimited sleep-in on a weekend? Many would sleep until noon or early afternoon if they could! Take an already erratic sleep schedule and factor in today's electronics (many teens play video games and/or sleep with their cell phones, talking and texting in the wee hours) and the stage is set for serious sleep deprivation.

Insufficient sleep-in teens has been associated with poor decision-making, increased risk-taking and drowsy driving—behaviors that can have extreme consequences. It has been shown that chronic sleep deprivation is as dangerous as staying up for 24 hours straight, and that those who sleep six to seven hours each night may be twice as likely to have a fatigue-related accident as those who get eight or more hours of sleep a night.

Adolescence is already a roller-coaster ride of emotions, and lack of sleep exacerbates teen moodiness. The 2006 Sleep in America poll found that 73 percent of the teens who reported feeling unhappy, sad or depressed also reported they did not get enough sleep at night and were sleepy during the day.