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Sleep Problems

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Many children have sleep problems. Examples include:

- Frequent awakening during the night
- Talking during sleep
- Difficulty falling asleep
- Waking up crying
- Feeling sleepy during the day
- Having nightmares
- Bedwetting
- Teeth grinding and clenching
- Sleepwalking
- Waking early

Many childhood sleep problems are related to poor sleep habits or to anxiety about going to bed and falling asleep. Persistent sleep problems may also be symptoms of emotional difficulties. "Separation anxiety" is a developmental landmark for young children. For all young children, bedtime is a time of separation. Some children will do all they can to prevent separation at bedtime. However, to help minimize common sleep problems, a parent should develop consistent, regular bedtime and sleep routines for children. Parents often find that feeding and rocking help an infant to get to sleep. However, as the child leaves infancy, parents should encourage the child to sleep without feeding and rocking. Otherwise, the child will have a hard time going to sleep alone. Bedtime routines, such as reading stories and teeth-brushing help the child understand it is time for bed.

Nightmares are relatively common during childhood. The child often remembers nightmares, which usually involve major threats to the child's well-being. Nightmares, which begin at a variety of ages, affect girls more often than boys.

For some children nightmares are serious, frequent, and interfere with restful sleep.

Sleep terrors (night terrors), sleepwalking, and sleep talking constitute a relatively rare group of sleep disorders, called "parasomnias." Sleep terrors are different from nightmares. The child with sleep terrors will scream uncontrollably and appear to be awake, but is confused and can't communicate. The child usually has no memory of the sleep terror in the morning. Sleep terrors usually being between ages 4 and 12. Children who sleepwalk may appear to be awake as they move around, but are actually asleep and in danger of hurting themselves. Sleepwalking usually begins between ages 6 and 12. Both sleep terrors and sleepwalking run in families and affect boys more often than girls. Most often, children with these sleep episodes occur several times a night, or nightly for weeks at a time, or interfere with the child's daytime behavior, treatment by a child and adolescent psychiatrist may be necessary. A range of treatments is available for sleep disorders.

As electronic devices have become a major part of all of our lives, "screen time" exposure can affect the body's natural signal to fall asleep. Using computers, tablets, and smart phones on the bed can be an unspoken message that the bed is for play and not for sleep. If electronic use is interfering with sleep, the following recommendations may help:

- All screens are turned off 1 to 2 hours before bedtime
- No media use in bedrooms
- Bedrooms should be electronics free at bedtime (no smartphones, tablets, or computers that may give alerts)

Sleep wake reversal may occur in some teens and cause problems with daily life. Sleep can be disturbed by mood disorders, post traumatic stress disorder (PTSD), substance abuse, attention-deficit/hyperactivity disorder (ADHD), and anxiety.

Fortunately, as they mature, children usually get over common sleep problems as well as the more serious sleep disorders (parasomnias). However, parents with ongoing concerns should contact their pediatrician, a sleep specialist, or a trained child mental health professional for a comprehensive evaluation.

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