

COMMON PEDIATRIC SLEEP DISORDERS

<p>Arousal Disorder</p> <p>Common Arousal Disorders Sleep Terrors - episodes characterized by extreme terror and a temporary inability to attain full consciousness.</p> <p>Sleep Walking – also known as Somnambulism is a condition in which a sleeping person exhibits behaviors associated with being awake but is actually still sleeping.</p>	<p>When a child transitions from deep sleep to a light sleep and/or partial wakefulness. This change will usually lead to a confused state. The child will display features of being awake and sleep.</p> <p>Behaviors associated with disorder: crying loudly, moving, running, mumbling during sleep and sitting up in bed and then falling right back to sleep.</p> <p>Elaborate behaviors: crying loudly in distress, inconsolable and ignoring the reassurance of the parent, seeming “very far away” There may even be aggressive behavior against parents reassuring the child and trying to escape an embrace.</p> <p>Very complex behaviors: Sleep walking</p> <p>Usually one episode occurs during the night within the first 2 hours of falling asleep. Although, there may be times where a child has several episodes during a single night and then go weeks without an episode.</p> <p>Possible Triggers: small disruption of sleep (health issue or travel), another sleep disorder (sleep-disordered-breathing, restless legs syndrome or nocturnal asthma), stress or anxiety.</p>
<p>Snoring</p>	<p>The vibration of respiratory structures and the resulting sound due to obstructed air movement during breathing while sleeping.</p> <p>Causes of Snoring: poor muscle tone, excessively bulky throat tissue, long soft palate, long uvula, stuffed or blocked nasal passages, deformities of the nose, deformities of the nasal septum</p> <p>Snoring prevention: The following may help mild or occasional snoring. A healthy lifestyle that includes exercise and proper diet, losing weight, avoiding tranquilizers, sleeping pills and antihistamines before bedtime, avoiding alcohol at least 4 hours before bedtime, avoiding heavy meals at least 3 hours before bedtime, establishing regular sleeping patterns, sleeping on your side and tilting the head of the bed up about 4 inches.</p> <p>Heavy or chronic snoring may require medical attention.</p>
<p>Upper Airway Resistance Syndrome (UARS)</p>	<p>A condition, in which the soft tissue of the throat relaxes, reduces the size of the airway resulting in disturbed sleep. Although similar to obstructive sleep apnea (OSA), UARS does not meet the same criteria as OSA.</p> <p>Common of symptoms of UARS are frequent sleep arousals, daytime sleepiness and fatigue, there are increasing efforts to breath during sleep, however, you do not stop breathing, headaches, complaints of insomnia, depression, cold hands or feet, gastrointestinal problems,</p>

	attention deficit disorder.
Obstructive Sleep Apnea (OSA)	<p>Occurs when the soft tissue of the throat relaxes, and the airway completely or partially collapses repeatedly throughout the night. When the airway is blocked, the oxygen levels in the body drop causing the person to wake up long enough to regulate his/her breathing. This pattern repeats throughout the night causing fatigue and sleepiness during the day.</p> <p>OSA in children is often overlooked because their symptoms are more subtle. Most children with OSA do not snore or are overweight. They rarely nap when tired. Many children become hyperactive (similar to children with ADHD) or develop behavioral problems. These problems may appear as irritability, lack of concentration, being distracted or acting out.</p> <p>Common symptoms of OSA in children may include: snoring, daytime cognitive and behavior problems, (including problems paying attention, easily distractibility, aggressive behavior and hyperactivity), mouth breathing, enlarged tonsils and adenoids, problems sleeping and restless sleep, sleep walking or night terrors, bed wetting. Failure to thrive (weight loss or poor weight gain), excessive daytime sleepiness.</p>
Central Sleep Apnea (CSA)	<p>CSA is a sleep related respiratory condition. It occurs when you repeatedly stop breathing during sleep because your brain does not cue your body to breath.</p> <p>CSA is characterized by frequent episodes of shallow breathing lasting longer than 10 seconds during sleep, abrupt awakenings accompanied by shortness of breath, shortness of breath that's relieved by sitting up, difficulty staying asleep (insomnia), excessive daytime sleepiness (hypersomnia), difficulty concentrating, mood changes, morning headaches and in some cases snoring.</p>
Restless Leg Syndrome (RLS)	<p>A disorder characterized by an unpleasant tickling or twitching sensation in the leg muscles when sitting or lying down, which is relieved only by moving the legs. Commonly runs in families, especially those cases that are severe and start early in life.</p> <p>RLS symptoms can range from mild to severe. Characteristics are a strong urge to move the legs and uncomfortable sensations in the legs. Symptoms start or become worse in the evening especially when lying down. A patient can experience relief when moving their legs. Relief persists as long as the motor activity continues. RLS can cause difficulty in falling or staying asleep.</p>
Insomnia	<p>Insomnia is the inability to obtain an adequate amount or quality of sleep.</p> <p>Night time symptoms include persistent difficulties falling and/or staying asleep and/or non-restorative sleep.</p>

	Day time symptoms – diminished sense of well-being, difficulties with concentration and memory, fatigue, anxiety and depression.
Nighttime Sleep Behaviors/Parasomnias	<p>Parasomnias are abnormal behaviors during sleep.</p> <p>Sleep walking/talking – sleep walking occurs when a sleeping person exhibits behaviors associated with being awake or appears to be awake but is actually still sleeping. Sleep talking happens when a person vocalizes anything from a few words to a whole conversation in their sleep.</p> <p>Sleep terrors – characterized by extreme terror and a temporary inability to attain full consciousness. The person may exhibit behaviors of fear, panic, confusion or a desire to escape. Sleep terrors are also referred to as night terrors.</p> <p>Confusional arousals – occurs when a sleeping person appears to wake up but their behavior is unusual or strange. The individual may be disoriented, unresponsive, have slow speech or confused thinking.</p> <p>REM behavior disorder – occurs when the body maintains increased muscle tone during REM sleep. This allows the sleeper to move and act out their dreams. Movements can span from minor leg twitches to more serious movements endangering the individual or the bed partner.</p> <p>Sleep paralysis – considered a disorder when it occurs outside of REM sleep. It can span from several seconds to several minutes and sometimes may be accompanied by hallucinations.</p> <p>Nightmares – vivid dreams that contain frightening images or cause feelings of fear, terror or anxiety. Based on when the dream occurs physicians are able to distinguish if it is a sleep terror or nightmare.</p>
Delayed Sleep Phase Syndrome (DSPS)	<p>DSPS is when a person’s sleep is delayed by 2 or more hours beyond an acceptable or conventional bedtime. The delay in falling asleep causes difficulty in waking up at the desired time.</p> <p>Symptoms of DSPS are inability to fall asleep, inability to wake up at the desired time and excessive daytime sleepiness, normally no other sleep problems and sometimes depression and behavior problems.</p>
Narcolepsy	<p>Narcolepsy is a nervous system problem that causes extreme sleepiness and attacks of daytime sleep.</p> <p>Symptoms of narcolepsy are excessive daytime sleepiness (EDS), cataplexy, hallucinations and sleep paralysis.</p>
Rhythmic Movement Disorders	A neurological disorder characterized by involuntary, repetitive movements of large muscle groups immediately before and during sleep often involving the head and neck.

	<p>Types of RMD</p> <p>Body Rocking: rocking the entire body while on hand and knees</p> <p>Head Banging: lifting head or entire upper body repeatedly against the pillow or mattress</p> <p>Head rolling: rolling head back and forth and making loud noises</p>
Nocturnal Enuresis (Bedwetting)	<p>Children with nocturnal enuresis may have excessive nocturnal urine production, poor sleep arousal and/or reduced bladder capacity. Children with this disorder may have daytime urgency and/or frequency of urine.</p> <p>Factors: if both parents had issues with bedwetting there is a 77% risk of your child having this same disorder. There are no psychological factors contributing to nocturnal enuresis. For most children, bedwetting is not an act of defiance.</p>
Bruxism	<p>Bruxism is the medical term for grinding teeth or clenching the jaws. Many kids experience it, but most outgrow it. Bruxism happens more often during the deep sleep phases or when kids are under stress.</p> <p>Some signs to watch out for are grinding noises when your child is sleeping, complaints of a sore jaw or face after waking up in the morning and pain with chewing.</p>
Circadian Rhythm disorders	<p>When a child or teenager's internal body clock causes them to sleep at a time that is not normal.</p> <p>Symptoms are difficulty waking up in the morning or trouble getting to school on time, difficulty falling or staying sleep, daytime sleepiness, moodiness or irritability, cognitive impairment and tardiness/absenteeism due to sleeping late.</p>
Nocturnal (nighttime) Seizures	<p>A seizure is a convulsive neurological disorder which occurs when the electrical activity in the brain increases suddenly. Seizures that occur while sleeping are referred to as nocturnal seizures. This type of seizure usually occurs as soon as the person falls asleep or just before the time he/she wakes up. Most individuals who suffer from nocturnal seizures, rarely realize that they had a seizure.</p> <p>Some symptoms are urinary incontinence, tongue biting, drooling and froth in mouth, wakes up in between sleep and are confused, person does not remember what happened, shaking of body or particular limb while sleep, teeth clenching, muscle spasms resulting in jerks and twitches, increase in daytime drowsiness, person often wakes up with headache and tingling on the face, tongue and throat which may wake the patient out of sleep.</p>