



Night Terrors, Sleep Walking and Nightmares

Normal sleep

Many people have heard of night terrors (sometimes called sleep terrors), sleep walking, and nightmares, but they are not always fully understood. In fact, they are very different, and need different techniques to deal with them. In order to understand which of these events your child may be experiencing, it is important to understand sleep, as the timing is crucial to identify which event is happening.

Normal sleep comprises of 2 states:

1. NREM (Non-Rapid Eye Movement) sleep - when we do most of our growth and repairing. This is shown in blue in the chart on the right.
2. REM (Rapid Eye Movement) sleep - when we do most of our memory consolidation and dreaming. This is shown in red in the chart.

We go through each type of sleep several times during the night in cycles. We need both NREM and REM sleep for our bodies to do all they need to do.

The chart on the right shows sleep stages for a young person sleeping for 9 hours. They are awake at the start of the night, then going into and out of the different stages of NREM sleep (blue) and REM sleep (red) through the night. Notice that there is more deep sleep (stage 3 on the graph) at the start of the night, and that the REM periods get longer as the night progresses.

At some points, this person wakes up (for periods that can be as short as fractions of a second) and then goes back to sleep - this is perfectly normal at any age. Eventually, they naturally start to waken after around 9 hours.

When would night terrors or sleep walking happen?

Night terrors and sleep walking are common in children, and are perfectly normal. They both happen in our deeper stages of sleep,

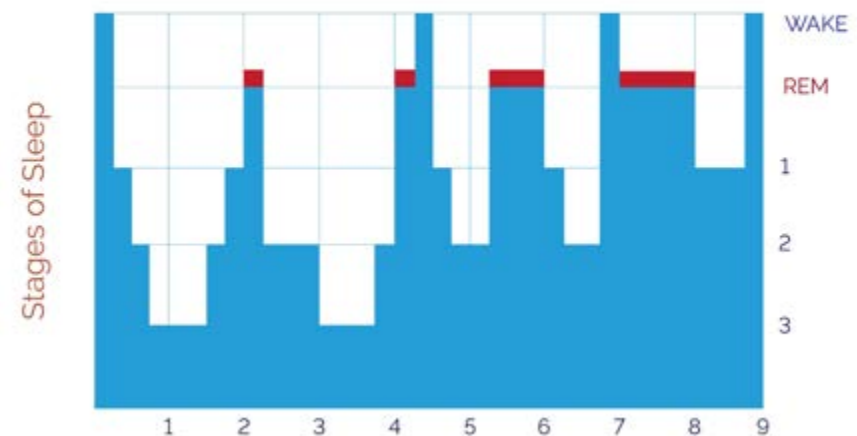
usually in the first half of the night. During this time, someone having a night terror or sleep walking is in their deepest sleep, and isn't actually awake.

A child would usually only experience one night terror or episode of sleep walking per night. If your child is experiencing several episodes per night, we would advise recording an episode, keeping a sleep diary, and speaking with your GP.

When would nightmares happen?

Nightmares are very common, and most children will experience them at some point. They tend to happen during REM sleep, so are more likely towards the second half of the night when we have more of this kind of sleep. Unlike night terrors, children tend to wake up after a nightmare.

A child may experience more than one nightmare in a night.



What do they look like?

Night terrors

These occur in around 1-3% of children, usually aged between 4 and 12 years old. They are more common in boys, but also do present in girls. Children usually grow out of night terrors by mid to late teens.

Common characteristics:

- Starts very suddenly
- Piercing scream or crying out
- Sits bolt upright
- Appears terrified or panicked
- Inconsolable - if you try to hold or reassure your child, they will become more distressed
- May jump out of bed and run around
- Appears confused and agitated
- Can last 5-15 minutes, then will end as suddenly as it began

Sleep walking

Sleep walking occurs in 15-30% of children at some point, with 3% experiencing it regularly. It often begins in early childhood, and can occur in children who also experience night terrors. Children usually grow out of sleep walking by the time they hit their late teens.

Common characteristics:

- Child gets up walks around
- Eyes often open
- Undramatic demeanour, usually calm
- Lasts 10 minutes or so
- Has a vague, or glassy look
- Unresponsive to instructions
- Can carry out fairly complex tasks, but part may seem unusual, e.g. make a bowl of cereal, then put it in the fridge.
- Can often open doors and windows, so making sure environment is safe is essential for sleep walkers

Nightmares

Nightmares occur in 75% of children, with 30-40% experiencing them regularly. They often start in early childhood, with an event or experience that has frightened the child regularly being reported as the reason behind nightmares beginning.

Common characteristics:

- Will wake up suddenly and be awake and alert
- Receptive and consolable - will seek comfort and cuddles from you
- Reports being frightened by a dream, usually fairly vivid
- Often has problems getting back to sleep and may need a parent or carer present
- Will remember the nightmare and/or being awake the next morning

More on next page...

What do they look like and what can I do?

	Night terrors	Sleep walking	Nightmares
Time it tends to occur	First half of the night	First half of the night	Last half of the night
How often it tends to occur	Once per night	Once per night	May be many times per night
Appearance	Terrified and confused	Calm	Afraid and alert
Behaviour	Sits up and screams	Gets out of bed and walks	Wakes up suddenly
Response	Unresponsive or resists comfort	Unresponsive	Seeks comfort
Sounds	Loud scream or cry	Quiet	Cries and describes a dream
Memory of event	Unlikely to remember event	Little or no memory of event	Remembers nightmare clearly
Return to normal sleep	Quickly returns to sleep	Quickly returns to sleep	Can take time

What can I do about them? Night terrors and Sleep walking

Children experiencing night terrors and/or sleep walking are asleep when they occur. Avoid waking them, as that can disrupt their sleep and mean they are more likely to have another event the next night. If your child otherwise sleeps well, they should not be sleepy the next day.

They will have little or no memory the next day of the event occurring. However, the events (especially night terrors) can be distressing for parents and carers to see happen. Rest assured that your child is OK and not as upset as it may seem.

We would suggest thinking about safety precautions, such as locking windows and removing hazards, as this can help keep your child safe during an episode.

Avoid triggers. A sleep deprived child is more likely to experience night terrors or to sleep walk, so getting enough sleep may reduce how often they happen.

Some children have other triggers, such as stress, anxiety, or even a TV programme.

Some children get upset if you tell them about their night terror or sleep walking episode, which can make them anxious and more likely to have one the next night. Avoid talking about them if this is the case.

What can I do? (continued)

What can I do about them? Nightmares

Children experiencing nightmares are more likely to wake up after they occur. It can take time to get back to sleep afterwards, so they may be sleepy the next day.

Anxiety can increase frequency of nightmares, due to higher levels of the hormone cortisol being in the body when going to sleep. Helping your child talk about anything that is worrying them earlier in the day can help them feel more relaxed at bedtime.

Your child may report nightmares linked to something that has scared them - often a TV show or similar, even one that is age appropriate. Can you talk to your child about the thing that scares them? Perhaps help them make it silly or show it is not real. For example, if it is a TV cartoon character, can you find a video of the real actor speaking? Alternatively, would a teddy in the room, or a dream catcher that is "to keep the bad dreams away" help them feel more relaxed?

Relaxation before bed can also help reduce nightmares - Gentle stretching or massage before bed, for example.

What can I do? Other ideas

- Find ways of dealing with stress or anxiety during the day so that your child is not taking those feelings to bed.
- Avoid sugar and caffeine from late afternoon as that can increase cortisol levels that make night terrors, sleep walking, and nightmares more likely to occur.
- For children over 4, avoid having a nap during the day so that they are sleepy enough come bedtime.
- Keep stimulating activities - e.g. exercise, watching TV, playing computer games - to earlier in the day so they are calmer at bedtime.
- Stick closely to consistent bedtime and getting up times to support your child's body clock.
- Try a relaxation technique or some massage before, or in, bed if your child does struggle with getting to sleep.
- Getting to know if there is a pattern can help avoid triggers. Keep a sleep diary for a few weeks - make a note each morning what happened the night before so you don't need to remember a whole week at a time.