

Sleep Terrors

Definition

- Sleep terrors are partial wake-ups in which children act terrified
- They act confused and can't be fully awakened
- Occur in 2% of normal children
- Peak age is 1 to 4 years
- Also called night terrors

Health Information

Symptoms

- During a sleep terror, your child will:
- Act afraid and mistake objects or persons in the room as dangers
- Scream or talk wildly
- Sit up in bed or run helplessly about
- Be very agitated or even in a panic state
- Not realize you are present, even though his or her eyes are wide open and staring
- Cannot be awakened or consoled, no matter what you do
- Episodes usually start 1 to 3 hours after falling asleep.
- Each episode lasts 5 to 20 minutes and ends of its own accord with the child falling back into deep sleep.
- In the morning, your child can't remember what happened.
- They can also occur during naps.

Cause

- Sleep terrors are a type of deep sleep disorder (parasomnia).
- It occurs in children who are dreaming but locked in deep sleep.
- It runs in families who also have a history of sleepwalking.
- The main trigger for bad nights is going to bed late or being very tired.
- They are not a psychological problem, but stress and fears can make them worse.

Care Advice

1. Try to Help Your Child Return to Normal Sleep:

- Your goal is to help your child go from agitated sleep to a calm sleep.
- Turn on the lights so that your child is less confused by shadows.
- Make soothing comments such as, "You're all right. You're looking for your bed."
- Speak calmly and in a quiet voice.
- Such comments are usually better than silence and may help your child refocus on sleep.
- Some children like to have their hand held during this time, but most will pull away.

2. Gently Guide Your Child Back to Bed:

- Try to lead your child to his bedroom and encourage getting into bed.
- Softly say "You can sleep now. You can rest".
- Don't try to restrain your child. He will become more upset.

3. **Don't Try to Wake Up Your Child:**
 - There is no way to abruptly stop the episode.
 - Shaking or shouting at your child will just cause the child to become more agitated and will prolong the attack.
4. **Protect Your Child from Injury:**
 - During a sleep terror, a child can fall down a stairway, run into a wall, or break a window.
 - Unlike sleepwalking, you will know if your child is having a sleep terror and go to him.
 - But be sure they can't go out through a bedroom window.
 - Avoid having your child sleep in the top of a bunk bed.
 - Be extra careful when camping or on vacations.
5. **Prepare Babysitters for Possible Sleep Terrors:**
 - Explain to people who care for your child what a sleep terror is and what to do if one happens.
 - Understanding this will prevent them from over-reacting (such as calling 911).
6. **How to Prevent Some Sleep Terrors:**
 - Try to keep your child from becoming overtired or exhausted.
 - Sleep deprivation is the most common trigger for frequent sleep terrors.
 - For preschoolers, restore the afternoon nap. If your child refuses the nap, encourage a one-hour "quiet time."
 - Try to avoid late bedtimes. If your child has bedtime resistance and tries to postpone going to bed, deal with that first.
 - If your child needs to be awakened in the morning, that means he needs an earlier bedtime. Move lights out time to 15 minutes earlier each night until your child can self-awaken in the morning.
7. **Try Prompted Wake-ups to Treat Severe Sleep Terrors:**
 - If your child has frequent sleep terrors and is over age 6, try this technique. It has cured some children.
 - Wake your child 1 hour after he falls asleep and before the time when a sleep terror normally occurs.
 - Remind your child at bedtime that when you do this, his job is "to wake up fast."
 - Keep your child out of bed and fully awake for 5 minutes.
 - Continue these "prompted wake-ups" for 7 nights in a row. Sleep terrors should occur less often.
8. **What to Expect:**
 - Sleep terrors usually disappear by age 6, but may last to age 12.

Call Your Doctor If

- Your child has frequent snoring
- Any drooling, jerking, or stiffening occurs
- Your child does something dangerous during an episode
- Episodes last longer than 30 minutes
- Episodes become more frequent
- Episodes occur during the second half of the night
- Your child has several daytime fears
- You feel family stress may be a factor
- You have other questions or concerns

Pediatric Care Advice

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