

Insomnia

Like adults, children with insomnia either have trouble falling asleep, staying asleep or are tired in the morning. In addition to being sleepy during the day, symptoms of insomnia may include: irritability, mood swings, hyperactivity, depressed mood, aggressiveness, decreased attention span and memory problems.

Causes:

One common cause is that children simply go to bed too late. This may be due to unrealistic parent expectations about the amount of time a child needs to sleep or overscheduled activities or perhaps your child may be up late talking on the phone, watching television, using the computer or playing video games.

Toddlers need 10-12 hours of sleep per night, while children ages 6-12 need 10-11 hours, teens need 8-10 hours and adults need 6-7 hours.

If you set a realistic bed time and your child still doesn't get a good nights rest, common causes may be:

- poor sleep habits
- caffeine
- stress
- obstructive sleep apnea (snoring)
- side effects of medications (stimulants for ADHD, antidepressants, steroids, anti-seizure medication)
- asthma (coughing)
- eczema (itching)
- depression or anxiety (consider seeing a counselor if you think your child is depressed or anxious)
- restless leg syndrome
- neurodevelopmental disorders (autism, mental retardation)
- GERD (gastroesophageal reflux disease)
- ADHD (If your child has ADHD some of his/her issues with sleep are inherent in having the disorder. Some sleep issues may be due to their medication, either too high a dose or a dose taken too late in the day.)

Treatments:

Although your first thought may be to turn to prescription medication, it is much more important to look for any underlying medical or psychological problems that may be treated first.

For example: if your child snores and has pauses in breathing he may need to have tonsils and/or adenoids removed. If your child coughs at night because of poorly controlled asthma, then a stronger asthma prevention medication may be needed. If your child is depressed then they may need assessment and/or medication for this.

1. Non-Drug Treatments:

- Restrict time in bed to sleep only. There should be no reading, watching television, computer time, telephone conversations or doing homework.
- Have a consistent schedule for going to bed and waking up. Don't alter this schedule on weekends, holidays and during school breaks.
- Teach your child relaxation techniques. Stretching may help too.
- Keep your child's room climate controlled and dark.
- Have a wind-down time before bed with reading or quiet time. The 30-60 minutes before bed time should not be stimulating (no television, video games, etc.).
- Avoid caffeine.
- Exercise earlier in the day is great for stress relief and muscle tension, but do not exercise just before bed time as this can be very stimulating.
- Keep a journal.
- Listen to soft music or "white noise".
- Keep a pad of paper, a flashlight or a voice recorder near bed so reminders may be kept.

2. Medications:

Prescription sleep medications are not approved in children and may have side effects. Some of the medications that may be safely used over-the-counter are:

- Melatonin. A 3 mg dose before bed time has been shown to improve sleep in children. It comes in liquid form (Vitamin Cottage). It should be used with caution if your child is depressed.
- Antihistamines such as Benadryl® may be used for a short period of time to facilitate the onset of sleep.
- Valerian Root (liquid, pill or tea) may be used in ages 3 and up but may take days to work. Minimal side effects include headache and gastrointestinal upset.

Please discuss your child's sleep concerns with us if the above strategies are not successful.