Confusional Arousal, Sleep Terrors, and Sleepwalking

Confusional arousals, sleep terrors, sleep talking, and sleepwalking are all disorders of arousal, also known as partial arousal parasomnias (which literally means “partially awake and partially asleep”). Although your child may appear confused, distressed, or engage in behaviors as if he were awake, he is actually sleeping through these events. In addition, even though he may be saying things that are confusing or distressing, he is not dreaming or having a nightmare.

Information About Parasomnias

- Parasomnias usually occur in the first part of the night, as this is the time we get most of our deepest (or slow-wave) sleep.
- These events are typically benign and self-limiting. This means they are not a sign of underlying psychopathology or trauma but are rather a physiological occurrence that happens as your child transitions between sleep stages.
- The primary trigger for parasomnias is insufficient or poor-quality sleep. When people do not get enough sleep or their sleep is disrupted, they have more slow-wave sleep, and with more slow-wave sleep comes more parasomnias. So if your child is not getting enough sleep because of a late bedtime, early rise time, or a disruption to his sleep schedule, or if your child has a medical illness (e.g., asthma, ear infection) or sleep disorder (e.g., obstructive sleep apnea) that disrupts the quality of his sleep, he is at risk for having more frequent parasomnia events.

How to Manage Parasomnias

1. **Make sure your child is safe.** Although children with confusional arousal and sleep terrors may not get out of bed, those who sleepwalk are at risk for injuring themselves during the night. Here are some safety tips.
   - Make sure that doors and windows are locked. If a window is left open, ensure that it does not open wide enough for your child to climb out.
   - Use a bell or alarm to alert you if your child gets up. There are different types of bells or alarms that can be placed on your child’s door. On the low-tech end, you can hang a cow bell or jingle bell on his doorknob to signal to you that he has left his room. On the high-tech end are wireless alarms that beep when the sensors are separated by an opened door or window.
   - Move things that are not in their normal places (e.g., toys in the hallway) that your child may trip over if he is sleepwalking.
   - Do not let your child sleep on a top bunk, and if you are concerned about him falling out of bed, move his mattress to the floor.

2. **Do not try to wake your child, as this will likely make the event last longer.** If your child is having a sleep terror, attend to him to ensure he is safe. If he is nonresponsive, let the sleep terror run its course. If your child is sleepwalking, simply guide him back to bed.

3. **Do not discuss the events in the morning.** Your child will not remember if he has a parasomnia event. However, if you discuss it with him the next day (e.g., “Do you know what you did last night?”), he may become fearful of having an event, which may delay sleep onset. This can result in your child not getting enough sleep and thus having even more parasomnia events.

4. **Have a consistent sleep schedule.** Parasomnias are more likely to occur when there is a schedule disruption, including a sleepover, late night because of a party or holiday, or when you go on vacation. Maintaining as close to a consistent sleep schedule as possible will reduce the likelihood of your child having a parasomnia event.
5. **Try to increase your child’s sleep duration.** For many children, simply getting a little more sleep each night is enough to decrease the frequency of parasomnias. You can either have your child go to bed 10 to 15 minutes earlier each night, or if you have to wake him in the morning, allow him an extra 10 to 15 minutes to sleep each morning. Although this does not seem like much, over 1 week an extra 15 minutes at bedtime or in the morning adds up to 1.75 hours of sleep!

6. **If your child is going to a sleepover or overnight camp, make sure the caregivers/staff are aware of his history of sleep terrors and sleepwalking so they are prepared to manage an event.**

   *Confusional arousals, sleep terrors, and sleepwalking are common events in childhood, especially in young children. Although these events are frightening for parents, children have no memories of these events, which are benign and self-limiting. To reduce the frequency of parasomnias, it is important to ensure your child has sufficient quality sleep each night, and when events occur, it is important to make sure your child is safe, and then try not to wake him or interfere with the event. Most children will naturally grow out of these events.*