NIGHT TERRORS

Night Terrors are also called sleep terrors or pavor nocturnus.

Similar to sleepwalking and sleep talking, Night Terrors are considered to be a disorder of arousal and are a partial arousal from non-REM sleep (Non Rapid Eye Movement Sleep). They usually occur during the first three hours or so of sleep, at a time of transition from our deepest sleep (Non Rapid Eye Movement Stage N3 Sleep) to Rapid Eye Movement Sleep (REM).

Night Terrors can be very frightening and confusing, usually for the parent who has to deal with them than the child who actually experiences them.

Night Terrors may affect about 15% of toddler and pre-school children. They usually occur in the first third of the night and are more common among children who are over-tired or who have experienced a severe physical or emotional upheaval in their lives.

Night Terrors can occur at any age, but are most common in children aged between 2 and 6 years.

Most children outgrow Night Terrors as they get older.

WHAT HAPPENS

A Night Terror will usually begin with the child moaning and moving about.

It then progresses quickly to the child crying out or screaming and thrashing about wildly. They may sit up, wide-eyed and staring at ‘something’ in the corner of the room. The child will appear to be awake, but is not really conscious and it is very difficult, if not impossible, to wake them fully to so that you can comfort them.

During a Night Terror children will often start sweating, breathing hard/fast and their heart rate will increase substantially.

Night Terrors can last anything from 5 to 30 minutes.

Parents who have experienced the terrifying and upsetting experience of a Night Terror often describe their child as acting like they are possessed, and this is not too far off the mark. A child in a Night Terror may stare right through one or either parent or they may actually involve their parents in their terrifying fantasy and lash out at them, sometimes with great force and considerable violence.

DIAGNOSIS

The diagnosis of Night Terrors is usually made by taking note of the history of a child ‘waking’ early in the night screaming and being inconsolable. Night terrors are most often confused with nightmares, but unlike Night Terrors, a child having a nightmare is usually easily woken up and comforted.

Though Night Terrors can be alarming for parents who witness them, they're not usually cause for concern or a sign of a deeper medical issue.
WHAT CAN YOU DO

There is something quite eerie about a child who looks awake, yet is not fully conscious and may not even be aware of a parent who is holding them in a vain effort to provide comfort. This sense of fear is infectious and the most important thing for you as a parent is to quell your own fear so that you can adequately deal with the imagined fears of your child.

SHOULD I TURN ON THE LIGHTS?

If a child experiences a night terror in a darkened room, the first thing a parent should do is switch on all the lights. Not only will this help to steady their own nerves, but it may also dispel whatever ‘things’ the child imagines they are seeing on the wall or in the corner of their room.

If a child has ever experienced a night terror, it is a good idea to install a night light in their room so that they do not go to bed in complete darkness in the future.

COMMUNICATION WITH THE CHILD

It can be very difficult to communicate with a child who is experiencing a night terror as they will not be fully awake. Parents should not argue or remonstrate with the child regarding their behaviour. It will do no good whatsoever.

Best advice is to try and soothe them in a gentle voice. If the child is conscious of anything, they will only be aware of the tone of the voice and this may allow them to drift back into normal sleep without ever knowing what has happened.

SHOULD I TRY TO WAKE MY CHILD?

Definitely not. If you try to waken your child they will probably become very agitated and won’t recognise you, mostly because of your own reaction to the night terror, especially if you were shaking or yelling at them to wake up. Instead of trying to wake up a child having a night terror, it is usually better to just make sure he is safe, comfort him if you can, and help him return to normal sleep.

A child who is experiencing a night terror will normally drift back into normal sleep without too much difficulty and will have little or no memory of the events which have taken place. If any memory persists, it will usually be in the form of a vague feeling of being trapped or being chased.

During the course of a Night Terror, it is best to comfort your child and ensure that they are safe.

ARE NIGHT TERRORS SIMILAR TO NIGHTMARES?

There is no connection whatsoever between night terrors and nightmares. Nightmares usually occur during the second half of the night, when dreaming is most concentrated, and a child who wakes up after a nightmare will have a very vivid recollection of their ‘scary dream.’ They will also be able to recognise a parent and be reassured by their presence. Unlike night terrors, a child may be very fearful following a nightmare and may have great trouble getting back to sleep again.

TREATMENT

There is no specific treatment for a child who is prone to night terrors, but it is worthwhile trying to avoid letting the child become over-tired and keeping the wake/sleep pattern as regular as possible. Sticking to a good bedtime routine and making sure your child is getting enough rest can help to prevent them.

For children who get frequent night terrors, it might help to wake your child up before the time that they usually have a night terror. This is thought to interrupt or alter the sleep cycle and prevent night terrors from occurring (it also works for sleepwalking).
Rarely, sleep medications might be used for a short time if your child gets very frequent night terrors.

If a night terror does occur, parents should remember the following points:

- Do not try to wake the child. It is not dangerous to do so but it may considerably prolong the agony for both parent and child.
- Although the natural instinct will be to hold the child in an effort to soothe it, this is best avoided if possible. The subjective experience of a child in a night terror is one of being trapped or caged, so grabbing hold of them may make them struggle all the more.
- Try to ignore any verbal abuse from the child. During a night terror the child is not fully awake and conscious and is therefore not aware of their actions.
- Try to relax and quell your own fears by switching on all lights. Speak calmly, slowly and repetitively and your soothing words will probably cause the child to drift back into a peaceful sleep.
- Protect the child from injury by standing against sharp edges on furniture and standing between the child and any windows in the room.
- In very exceptional cases where night terrors are happening on a very regular basis, (or more particularly in the case of adolescents who experience what are termed as true night terrors) medication, hypnotherapy or other forms of relaxation exercises may be recommended.

**DISCLAIMER:** While every effort is made to ensure medical accuracy, this paper should not be used to diagnose or treat a sleep disorder. In all cases the advice of a properly qualified medical practitioner should be sought.

The Irish Sleep Apnoea Trust (ISAT), its officers or committee members can not be held liable for any errors.