

## Sleep

This factsheet busts six myths around sleep and sleep problems in children with a brain condition. We understand that if you have one child that doesn't sleep, the whole family suffers. Our range of sleep services will help your child – and everyone in your family – get a good night's sleep. For further information please visit: <https://cerebra.org.uk/get-advice-support/sleep-advice-service/>



### 1. Myth: We should always sleep in a quiet environment

Your child may be unable to fall asleep in an environment that is too quiet. If this is the case playing classical music or relaxing sounds at a low volume throughout the night could be helpful. Studies have shown that music can help with falling asleep<sup>1</sup>, sleep duration and sleep efficiency<sup>2</sup>.

'Pink noise', (for example the sound of steady rain, leaves rustling in the wind or waves) and 'white noise', (which sounds like static on the T.V. or an untuned radio), have also shown to be helpful in assisting sleep<sup>3</sup>.

Both white and pink noise contain all the frequencies of sounds that we can hear and work by masking sudden changes in noise that may cause waking.

### 2. Myth: "Early to bed, early to rise, makes a man healthy, wealthy and wise..."

This well known saying may be true for some and it is certainly beneficial to have a consistent sleep routine. However, all children are different and your child's sleep needs should be tailored to their individual circumstances.

### 3. Myth: Twins should sleep in the same room / at the same time.

If one of the twins has a brain condition, then it is possible that their sleep requirements will be different, and things will need to be adapted to suit the needs of the whole family.

### 4. Myth: Children snoring is normal

Many children snore from time to time. This could be due to congestion from a cough, cold or sore throat. However regular and loud snoring could affect the quality of your child's sleep or be a sign of a health problem. It is advisable to speak to your GP if this is the case for your child.

## References:

1. <https://www.tandfonline.com/doi/abs/10.1080/0300443991500106>
2. <https://academic.oup.com/jmt/article-abstract/41/2/128/929506>
3. <https://www.ncbi.nlm.nih.gov/pubmed/22726808>

Further information can also be found at <https://patient.info/doctor/sleep-problems-in-children>

## 5. Myth: Children who are hyperactive do not need as much sleep as other children

The symptoms of hyperactivity could be masking signs of tiredness and anxiety in your child and could even be the cause of raised levels of the stress hormone cortisol. This may make it harder for your child to sleep but doesn't necessarily mean they need less sleep. A set bedtime routine could help your child settle.

## 6. Myth: If my child constantly falls asleep really late I should try settling them earlier

The chances are that your child's body clock may be out of synchronisation. If your child is having difficulty falling asleep at a desired time, but is settling before 1 a.m. then 'phase advancement' or moving their bedtime backwards may help. This is where you would put them to bed later initially until they were settling at that time and then bring it back by 15 minutes, repeating the method until you reach a more appropriate bedtime.

### Further information

Our sleep guide and sleep tips booklet help parents understand sleep problems and offer advice on how to tackle and improve common sleep problems.

Our anxiety guide describes common signs of anxiety and informs you on how to spot signs of anxiety in children with intellectual disability. It also details specific anxiety disorders.

Available to download from: <https://cerebra.org.uk/get-advice-support/parent-guides/>



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