

SLEEP DISORDERS

Sleep disorders in infancy and childhood are one of the more common reasons for a parent to contact my office. There are cures for these problems, but prevention in the first place is best. Let's focus on the most common problems.

All children during the first two years of life wake frequently at night and then are able to put themselves back to sleep; however, some are unable to do this by themselves because they have become dependent on their parents of a particular bedtime habit.

The Trained Night Feeder

By four months of age, roughly 90% of all infants are capable of sleeping through the night (8 consecutive hours without feeding). The most common reason for a baby to become a trained night feeder is that he becomes conditioned to expect frequent feedings during the daytime. This pattern develops when parents, though well intentioned, make the mistake of responding to their infant's crying spells with a bottle or breast feeding. Instead of feeding the child too often, the parent should simply hold or pay attention to the infant.

A second common reason for a baby to become a trained night feeder is the association of feeding with falling asleep. Many parents will offer the breast or bottle until the infant is totally asleep, or worse yet, will place a bottle in bed with the child. In these cases, the bottle or breast becomes the key transitional object which helps the infant cross from wakefulness to sleep. When the infant awakes later at night, he is unable to fall back to sleep without the object being present. Some parents use a pacifier instead of a bottle, but when it falls to the floor or is out of the infant's reach, he again will cry and wake the parent.

To prevent this problem from developing, parents should follow a few simple steps. First, begin soon after birth to place the baby in bed sleepy but awake. When the infant tires towards the end of his night feeding, put him to bed rather than encouraging him to finish the last drop or move the night feeding up 15 to 30 minutes. Second, make your middle of the night feedings brief and not a social event. Offer a few ounces less milk or just one breast and don't play with the baby. An infant needs to learn that night time is for sleeping. Third, try to spread out your daytime feeding to at least 2 ½ hours for bottle fed and 2 hours for breast fed babies. More frequent feeding during the day make it more likely that the infant will be hungry at night. Lastly, do not put bottles in bed with the child, and if you choose to feed at bedtime, hold the bottle yourself.

The Trained Night Crier

These infants are older than four months of age and have given up their middle of the night feeding, but wake up and cry until they are picked up by their parents. Generally this pattern of behavior develops when parents respond to baby's night waking with nurturing efforts. These efforts may take the form of rocking, talking to the infant, turning on the lights, or even bringing the child to the parent's bed. Many of these infants are not put to bed awake and alone, but are rocked to sleep instead. Just as the trained night feeder is attached to his bottle, the trained night crier is attached to the parent and the parent becomes the transitional object. Babies can develop

this pattern early in life, or it can result from disruptions in normal sleep patterns which occur with illness and vacations.

This problem can best be treated by allowing the infant to cry; at least five minutes if he awakens at night. Infants need to learn that they can be responsible for falling back asleep themselves. If the crying continues, the parent may go into the room but should not turn on the light or remove the child from the crib. A gentle pat to settle the infant is OK, but talking to the baby and eye contact should be kept to a minimum. If this sleep pattern has been going on for a long period of time, it will take one to two weeks to break the pattern. During that time, the parent may check the child every fifteen minutes until he falls asleep.

To prevent this problem, first place the baby to bed sleepy but awake as early as one month of age. Second, minimize social contact that takes place in the middle of the night when it is necessary to feed, change, or check a sick infant. Lastly, have the child sleep in his own room as soon as you are comfortable doing so. This removes the possibility of the parents being a visible option for the child when he wakes.