

# Getting in Enough Zzzzzzzs for Optimal Health



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**S**ummertime and the living is easier. No homework. No more strict school schedules. And more play time. But the season of sunshine and ease also can loosen up important routines such as a child's sleep routine.

Sleep is essential to a child's health, and its necessity for healthy physical and cognitive growth cannot be underestimated. About Our Children consulted with medical expert, Dr. Stephanie O. Zandieh, director of the Pediatric Sleep Disorders and Apnea Center at Valley Health Medical Group, who is also a clinical assistant professor at Weill Cornell Medical College, for some wisdom on the subject.

**About Our Children:** How much sleep should a baby, toddler, child, adolescent and teen get each night?

**Dr. Stephanie Zandieh:** I am often asked, "How much sleep does my child need?" The answer is, it depends. There is significant variability in sleep needs from child to child and across age ranges. There is no "magic number" needed by a child of a certain age. Moreover the guidelines that are listed in the accompanying chart should be adjusted for each child's individual situation, i.e., whether the child or adolescent is receiving sufficient amount of sleep, has excessive daytime sleepiness, and/or requires additional sleep on the weekends. Ideally parents should strive to allow their child's schedule so that they may get as many hours of sleep a day as they need while avoiding all conditions which would tend to abbreviate their sleep duration.

**AOC:** What happens to a youngster when he or she does not get the required amount of sleep? How does it impact, growth, mood and other vital issues?

**Dr. Zandieh:** To date we do not understand all the functions of sleep but it is recognized that sleep plays a vital role in restoration of tissues and muscles; energy conservation; and assists with learning and consolidation of daytime experiences. Moreover insufficient quantity and/or quality of sleep impacts a child's physical and mental health, cognitive function, behavior, and academic success. Additionally, there is evidence that shows associations between insufficient sleep and a host of adverse health outcomes in children and adolescents including increased obesity risk, higher rates in motor vehicle accidents and accidental injuries, and depression. Conversely, there is growing research that indicates the positive impact of sleep extension on cognitive function in children and adolescents.

**AOC:** Can a child make up for lost sleep?

**Dr. Zandieh:** The short answer is no, there is no replacement for sleep. Children appear to be able to tolerate a single night of restricted sleep without decreased daytime performance on brief tasks. However children seem to require more time to recuperate fully from sleep restriction than adults.

**AOC:** What are the most common pediatric sleep problems and how could they best be addressed?

**Dr. Zandieh:** It has been reported that about 25 percent of all children experience some type of sleep problem at some point during childhood and ado-

lescence. Problems range from short-term problems such as difficulty falling asleep and waking at night to more serious sleep disorders such as obstructive sleep apnea and narcolepsy. Sleep problems can be treated. Parents can learn strategies to prevent sleep problems from developing in the first place as well as from becoming chronic if they already exist. The first step is to understand their child's sleep needs and preferences by answering questions such as: How much sleep does my child need to feel well rested? What is my child like when he/she hasn't gotten enough sleep? What time does my child prefer to go to bed at night and get up in the morning? How much "down time" does my child need before bed? What makes my child feel safe at night? The answer to these questions can then help parents develop appropriate bedtime routines, bedtimes, and good sleep habits. These simple steps will go long way toward avoiding bedtime struggles, unhappy mornings, and falling asleep at school.

**AOC:** Can you explain what is sleep hygiene and how can parent can implement that routine?

**Dr. Zandieh:** Sleep hygiene is a phrase used to describe good habits that optimize the quantity and quality of an individual's sleep.

1. Establish consistent bedtime routines with dim lights and calm quiet activities. For young children, the bedtime routine should be about 10 to 20 minutes in length. When complete, parents should be able to say good night and leave while the child is still awake but sleepy. Older children routines should have routines such as a bath or show-

er, reading, and or listening to music. It is also important to ensure that the bedroom is electronic and screen free. That means no cell phones, tablets, or computers.

2. Go to bed and wake up at the same time every day including weekends. Wakeup times are much easier to control and help to determine when an individual can fall asleep.

3. No caffeine after lunch. Caffeine can continue to affect the body up to 12 hours after consumption.

4. In the morning, allow for bright light and be active.

5. Lastly, get the sleep in your body needs.

**AOC:** When would it be appropriate for a parent to take a youngster to a sleep specialist?

**Dr. Zandieh:** This is difficult to answer because every family and child is unique and has their own set of circumstances. A parent should see a sleep specialist if they feel they need assistance with getting their child the quantity and quality of sleep needed. Moreover, if a child is snoring more than three nights a week, complaining of consistently being tired during the daytime, or are unable to focus during the day, than they should be evaluated by either their pediatrician or someone like myself, a sleep specialist.

**AOC:** Now that it's summer and schedules have shifted—or youngsters are off to camp—how can a parent ensure that the child is getting adequate sleep?

**Dr. Zandieh:** Summertime allows children to get in touch with their circadian clock in that there is a good amount of bright light during the morning and they can wake up spontaneously when they feel rested. The best way to know if your child is getting enough sleep at night is to evaluate their daytime functioning. Most children (and adults) who are sleep deprived appear to "fall apart at the seams" this may be evident through hyperactivity, excessive sleepiness, or inability to cope as well as they normally do when they get a good night's sleep. If this is the case, I suggest that a parent review their child's bedtime routines, bedtimes, and make the appropriate adjustments if needed.

*Heidi Mae Bratt is the editor of About Our Children*

Age	Total Number of Hours	Nighttime Sleep	Daytime Sleep	Number of Naps
Newborn	16 (14 – 17)	Varied	Varied	Varied
3 months	13 (11 – 15)	8½	4½	3 – 4
6 months	12½ (12 – 15)	9¼	3¾	2 – 3
1 year	11¾ (11 – 14)	9¼ – 10¼	1½ – 2½	1 – 2
2 years	11½ (11 – 14)	9¾	1½	1
3 years	11¼ (10 – 13)	9¾ – 11¼	0 – 1½	0 – 1
4 years	11 (10 – 13)	10 – 11	0 – 1	0 – 1
6 years	10½ (10 – 11)	10½	0	0
10 years	10 (10 – 11)	10	0	0
Teens	9¼ (8 – 10)	9¼	0	0