



### What is a Nightmare?

Nightmares occur when your child is woken while having a bad dream. It is sometimes not easy to comfort your child because he or she might recall the content of the nightmare and be afraid to go back to sleep. Give your child a reassuring hug and then settling back to sleep is usually quick. Nightmares can occur in children of any age and are most likely to happen during the later part of the sleep such as in the early morning. This is when Rapid Eye Movement (REM) or Dream Sleep usually occurs. Nightmares can reflect worries that your child might be having during the day and it might be useful to talk to about this with them.

### What's the difference between Nightmares and Night Terrors?

Night terrors occur when children are partially aroused from deep (Stage 4) sleep. They are not quite awake yet not completely asleep. Throughout the night terror your child's "mind" remains asleep, whereas the "body" looks somehow awake and facial expressions are very emotional. Your child may scream and appear very frightened, usually not recognising the parents or carers. It will be difficult to reassure your child and they may try to run away or push away those trying to console. Night terrors do not arise from REM sleep and are therefore under the group of Non-REM sleep disorders. Usually your child does not remember having the night terror the next morning.

Night terrors tend to occur in younger children and are usually outgrown by the end of primary school age. They are also different to nightmares because they usually take place in the early part of the night, usually one or two hours after the child falls asleep. Like nightmares, there are usually no long-term psychological effects.

### What to do?

#### Nightmares

With nightmares, it is usually enough to reassure your child and stay with them until they are comfortably off to sleep again. The next day, it usually helps to talk about the dream and ask about any worries or fears they may be experiencing.

#### Night Terrors

With night terrors, your child will appear to be confused and not fully awake so keeping them out of harm's way is important. Make sure the home environment is safe as they may sometimes run around (see [Home Safety Checklist](#) fact sheet). Doors and windows should be locked and sleeping on the ground floor is encouraged.

During the episode keep them away from danger by gently restraining them- your child will usually go straight to sleep after a few minutes. Parents / carers often report that the more they try to wake them the longer the episode lasts.

### Can they be prevented?

#### Nightmares

Before bedtime, try to spend time with your child and ensure activities have a calming effect, eg. reading a book with them. Try to avoid your child watching exciting videos, inappropriate television or commencing vigorous activity prior to bed. For children 12 months and older, avoid food and drinks one hour before bedtime.

#### Night Terrors

It is important to make sure your child has a very regular bedtime and consistent routine. This will help to ensure that they get enough sleep.

# Fact Sheet

## Nightmares and night terrors



Fevers also make night terrors worse so it is important to try and keep the fever down when your child is sick (see [Fever](#) fact sheet). If the night terror happens at the same time every night, it sometimes helps to completely wake your child (for example by gently nudging their shoulder until they stir) 15 minutes before this time, letting them drift off to sleep again. This can be very effective – usually after 4 or 5 nights of this you can stop the partial waking and see if the night terrors have stopped.

### What is the Treatment?

It would be wise to see the doctor if the nightmares or night terrors are frequent, severe, disruptive, dangerous, happen at an unusual age or seem to affect your child's performance during the day by causing sleepiness. It is important to rule out an underlying medical disorder related to sleep such as sleep apnoea (snoring, stopping breathing and working hard to breathe), heartburn, epilepsy (very stereotyped and repetitive features) and periodic limb movements (the child complains about pains in the limbs and seems to be restless in sleep). These can cause a partial arousal, which might lead to a night terror. Treating the underlying cause often "cures" the night terrors.

Most recently hypnotherapy has been shown to be effective. Unusually medication might be needed, especially if the events are extremely distressing for all, frequent or seem to impact negatively on the child's daytime behavior and performance.

Sleep disorders are very common in childhood and fortunately most of the time there are no underlying medical conditions. Your local doctor and Paediatricians are very familiar with these problems and can offer help.

### Remember

- Nightmares are bad dreams that are usually related to worries your child may have. They usually go away after talking about these worries with your child.
- Night Terrors can be very frightening and usually happen one or two hours after falling asleep. Gently keep your child out of harm's way until it passes. Keep the home environment safe.
- Make sure there is no underlying medical condition such as sleep apnoea.
- It is important to make sure your child gets plenty of sleep, avoiding sleep deprivation. Keep a regular bedtime routine and keep fevers down.

This fact sheet is for education purposes only.  
Please consult with your doctor or other health professional  
to make sure this information is right for your child.

This document was reviewed on Tuesday, 23<sup>rd</sup> September 2008.

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