

# Sleep disturbance and its psychological significance in children with Down syndrome

University of Portsmouth - Tourette Syndrome in Children

Table 4. Treatments for Behavioral Insomnia of Childhood	
Treatment technique	Description
Parental education	Parents are taught about good sleep routines, such as consistent feedings, nap times, bedtime routines, regular sleep-wake times, and placing the child in bed down.
Unmodified extinction	The child is placed in bed at a predetermined bedtime. The child's crying, calls for the parents, and tantrums are ignored. If the child wakes up during the night, parents ignore cues for suspected injuries or illnesses are not ignored. Cries are ignored to prevent reinforcing negative learned behavior (e.g., crying leads to parent response).
Graduated extinction	This has been found to be difficult and distressing for parents. Modified version for decreased parental distress: A parent stays in the child's room, but follows the same procedure.
Positive bedtime routines/Faded bedtime with response cost	This is fundamentally the same as unmodified extinction, but with positive reinforcement. A parent checks on the child on a fixed schedule (e.g., every 10 minutes) or in gradually increased intervals (e.g., 10 minutes, then after five minutes, second check-in after 10 minutes). Parents respond to the child's cries in a positive, but fast no more than one minute at a time. Positive bedtime routines: Relaxing/calming activities are implemented before bed. Faded bedtime: Bedtime is delayed until the predicted time of awakening, but because the time the child spends in bed available response cost. The child is removed from bed for a quick check-in if they wake up again, but do not occur within the desired period.
Scheduled awakenings	Parents are woken before the normally predicted time of awakening, and the number of scheduled awakenings is slowly decreased over time.

Description: -

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## Tourette Syndrome in Children

Lastly, some parasomnias are not isolated to the NREM or REM stages. Toddler sleep problems are compounded by separation anxiety and a fear of missing out, which translates to stalling techniques and stubbornness at bedtime. TS begins before 18 years of age.

## Children and Sleep

Children and adults with Down syndrome commonly experience a range of sleep-related difficulties either as a primary sleep disorder or as associated with mental-health problems such as generalized anxiety and mood disturbances. They often cause excessive daytime sleepiness and fatigue due to sleep loss. Most sleep apnea cases fall into one of the following two categories.

## Facts about Down Syndrome

Women who are 35 years or older when they become pregnant are more likely to have a pregnancy affected by Down syndrome than women who become pregnant at a younger age. Recent medical advances, as well as cultural and institutional support for people with Down syndrome and their families, provides many opportunities to help overcome the challenges of this condition. Situational anxiety is often apparent during transitions and anticipation of new situations, such as transitions from home to school; during transit and at mealtime or bedtime; as well as in unfamiliar situations where the environment creates uncertain expectations.

## Sleep Disorders

The best thing you can do is make sure your child is safe, trying to keep them in bed if possible. WHAT IS THE HISTORY OF THE GUIDELINES? Increased activity of SOD was found in post-mortem studies of people with Down's syndrome. Advances in nutrition Bethesda, Md.

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