

# MSA NEWSLINE

*Up-to-date Information on Maternal Substance Abuse and Child Development*

## Sleeping Problems in Children

### Common Sleeping Problems in Children

According to the *American Academy of Pediatrics*, addressing these common sleep problems early will help develop healthy sleep habits.

**Nightmares** Children often have trouble getting back to sleep after a nightmare because they remember the details of the scary dream.

**Night Terrors** Night terrors are more intense or frightening than nightmares. They occur in the deepest stage of sleep and children cannot be awakened during them.

**Sleepwalking and Sleep Talking** Sleepwalking and sleep talking tend to occur when a child is stressed or overly tired.

**Bedwetting (Enuresis)** Bedwetting can occur if the bladder is not developed enough or if the child does not recognize a full bladder and wake up. Stress, such as a new baby, moving or divorce, may also cause bedwetting.

**Teeth Grinding** Teeth grinding is often related to anxiety or stress in the child's life.

### Sleep Disturbance at 24 Months: Quality of Caregiving and Prenatal Cocaine Exposure

Sleep disturbances are common in infancy although the number and severity decrease with age. Sleep disorders are important not only because of their immediate effect on the child and family but because children with disordered sleep are more likely to have other behavior problems. Research suggests that children's sleep patterns can reflect both physical problems and their relationships with their caregivers. Problems in the marriage, parents' health problems, and social stress in families can show up as sleep disturbances in children.

Families that have problems with substance abuse are likely to have children with sleep and behavior problems. To examine the contributions of prenatal drug exposure and the caregiving environment to sleep problems in full term and preterm infants, we looked at 170 low socioeconomic status (SES), African-American infants and their caregivers at 24 months. In addition to sleep patterns, we tested development, behavior, caregiver characteristics and environmental factors. Caregivers answered questions on these items on the Achenbach Child Behavior Checklist (CBCL) and a Structured Clinical Interview (Platzman et al., 2000).

In this group, caregivers of drug exposed infants report more sleep problems. Although mothers used alcohol, marijuana, and cigarettes in addition to cocaine, we found that sleep problems were associated with prenatal exposure to cocaine (but not other drugs) and to disorganization in caregiving. Problems in providing a structured routine are common in families where drug abuse occurs. Drug-exposed children have more

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## News Briefs

### SIDS and Prenatal Cocaine Exposure

Over the past decade, an increasing number of infants were born exposed to cocaine. This has led to increased concern over their risk for Sudden Infant Death Syndrome (SIDS).

Fares, McCulloch, and Raju (1997) examined the link between Sudden Infant Death Syndrome (SIDS) and intrauterine cocaine exposure by reviewing 10 studies. They found that a greater risk for SIDS was not attributable

difficulties than non-exposed toddlers in falling asleep and maintaining sleep and were reported to have more nightmares. However, no differences were reported in the time to fall asleep or in the total sleep time.

We looked back at the information that we had collected about these babies when they were newborns and at 8-weeks. Cocaine-exposed newborns were more irritable and 8-week olds had more difficulties in regulation of their arousal, as measured by heart and respiratory rate.

However, there were no developmental or growth differences. These results suggest a specific difficulty with self-regulation that may be seen as sleep problems at 24 months.

For more information, contact the Maternal Substance Abuse and Child Development Project at (404) 712-9800.

to cocaine exposure alone, but to prenatal exposure to illicit drugs in general.

Ostrea, Ostrea, and Simpson (1997) found that while prenatal drug exposure is related to high perinatal morbidity, it is not associated with an increase incidence of SIDS in the first two years of life.

Bauchner et al. (1988) also found no increased risk for SIDS related to prenatal exposure to cocaine in infants.



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The *Maternal Substance Abuse and Child Development Project* is dedicated to the study and prevention of the effects of maternal substance abuse. Since 1978, the project has studied the development of children exposed to alcohol and other drugs prenatally and their caregivers and provided training for Prevention statewide. For additional information call (404) 712-9800.