

Pediatric Restless Sleep

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پژوهشگران ایرانی بر استناد یک درصد برتر جهان

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چهارمین نفر است که در این حوزه به این رتبه دست یافته است.



Introduction

- ▶ Restless sleep in children is a common but often overlooked issue.
- ▶ It may affect development, behavior, and quality of life.
- ▶ Understanding the causes and management is essential for clinicians.



Epidemiology

- ▶ Prevalence: **5-10%** of children may exhibit restless sleep patterns.
- ▶ More frequent in boys than girls.
- ▶ Often coexists with **ADHD** and other **neurodevelopmental** disorders.



Clinical Presentation

- ▶ Frequent movements during sleep (kicking, tossing).
- ▶ Noisy sleep: moaning, talking, or groaning.
- ▶ Night awakenings and difficulty returning to sleep.
- ▶ Daytime irritability or hyperactivity.



Differential Diagnosis

- ▶ Obstructive Sleep Apnea (**OSA**).
- ▶ Restless Legs Syndrome (RLS) / Periodic Limb Movement Disorder (PLMD).
- ▶ Parasomnias (night terrors, nightmares).
- ▶ Anxiety or behavioral disorders.



Diagnostic Workup

- ▶ Detailed sleep history from parents.
- ▶ Use of sleep questionnaires (e.g., CSHQ).
- ▶ Consider PSG in complex or atypical cases.
- ▶ Check iron status (ferritin, serum iron), vitamin D.

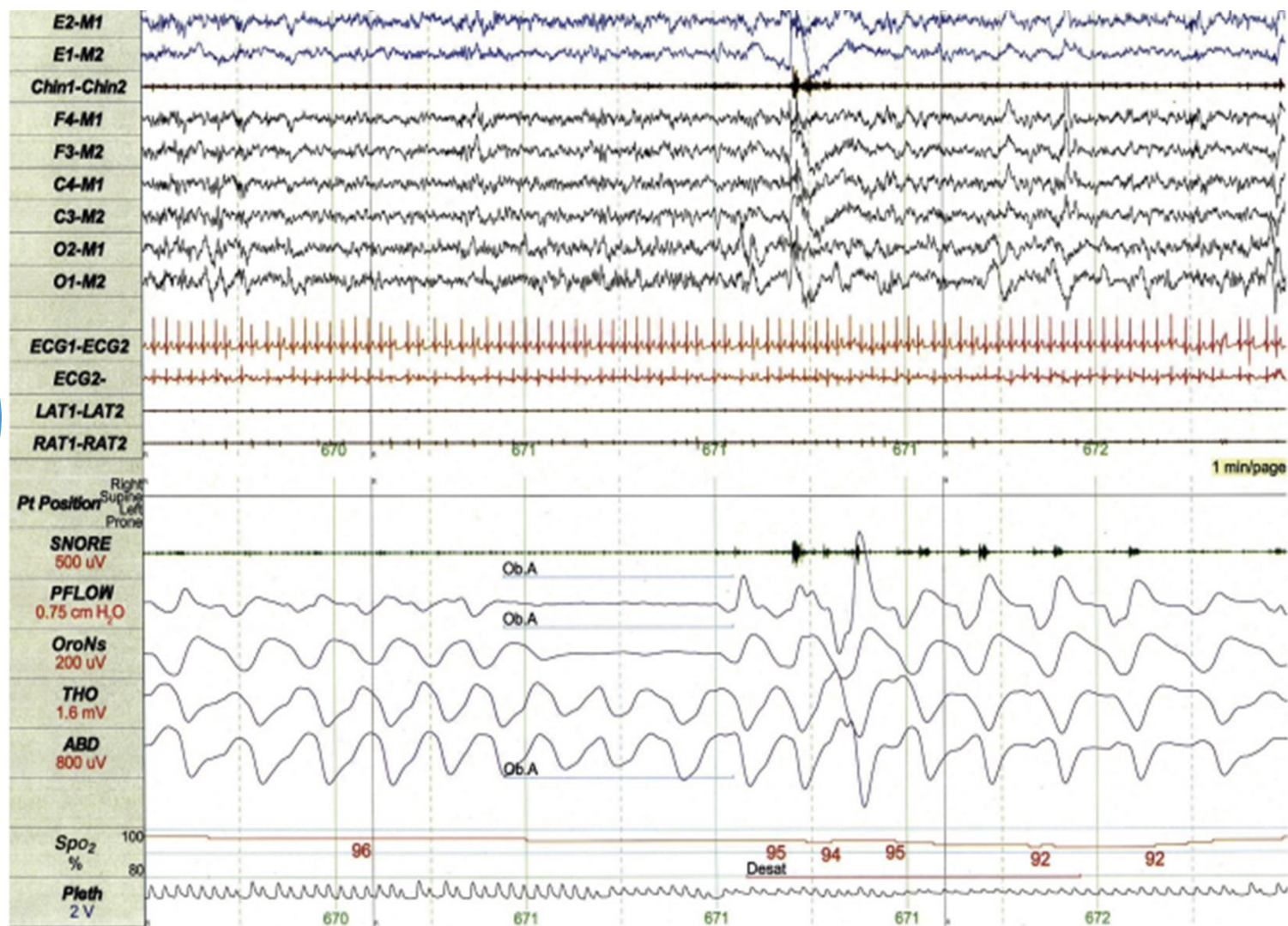




SLEEP CLINIC Dr. IMANI



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Underlying Causes

- ▶ Iron deficiency is a significant contributor.
- ▶ Environmental factors: screen use, irregular sleep schedule.
- ▶ Psychological stress or family dynamics.
- ▶ Genetic predisposition to movement-related disorders.



Treatment and Management

- ▶ Treat underlying cause (e.g., **iron** supplementation).
- ▶ Improve **sleep hygiene**: consistent schedule, calm bedtime routine.
- ▶ Parent education and reassurance.
- ▶ Referral to **specialist** in resistant or unclear cases.



Parent Counseling

- ▶ Monitor sleep patterns and behaviors.
- ▶ Avoid caffeine, screens before bedtime.
- ▶ Create a consistent and calming bedtime routine.
- ▶ When to seek medical help: frequent awakenings, daytime issues.



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