

Journal of Pharmaceutical Sciences and Research www.jpsr.pharmainfo.in

Common Sleep Disorders in Adolescents- A Survey

Rene Jochebed. S, Jothi Priya. A

Saveetha Dental College and Hospitals, Chennai 162, Poonamallee High Road, Thiruverkadu, Chennai- 600 077

Abstract:

Topic: Common sleep disorders in adolescents- a survey AIM : The aim of this survey is to know the occurrence of common sleep disorders in adolescents by giving a questionnaire.

Objective: To know the common sleep disorders which are widely prevalent among adolescents.

Background: Sleep is essential for adolescent health, development and functioning. Inadequate sleep in adolescents may cause poor performance in school, anxiety, depression and even aggressive behaviour. One reason is that there is a shift in the timing of the circadian rhythms after puberty which result in abnormal sleep. Some common sleep disorders found in adolescents are chronic insomnia, delayed sleep phase syndrome(DSPS), obstructive sleep apnea, narcolepsy and so on. **Reason:** Sleep disorders in adolescents lead to further changes which may cause complications in the future. It can be

Reason: Sleep disorders in addressents lead to further changes which may cause complications in the future. It can be avoided by treating these sleep disorders at an early stage itself.

Keywords: adolescents, behaviour, circadian rhythms, lifestyle changes, prevelant.

INTRODUCTION:

Sleep is the most beautiful thing, yet the most mysterious thing. Sleep may be defined as a naturally occuring state of the body within relatively inhibited sensory activity, reduced metabolic rate and decreased interaction with the surrounding. Averagely, a person requires about 7-8 hours of sleep for good functioning of the brain and the Adolescents and older children may suffer from body. lack of sufficent amount of sleep. This may be ascribed to two categories: * Not sleeping for adequate number of hours * Lack of quality sleep The reasons for this may be due to the fact that they get involved in school, studies after-school activities, certain commitments, circumstances etc. Also, social factors such as reduced parental influence may affect adolescent's sleep pattern. Refusal to attend school or lack of interest may be due to the lack of proper sleep. According to the National Commission on Sleep Disorders Research, approximately 70 million Americans suffer from sleep related disorders[1]. Out of chronic sleep these 70 million, about 40 million have disorders [2].A number of recent studes have demonstrated that individuals with sleep problems report significantly poorer health, less energy and worse cognitive functioning than those categorized as having no sleep problems [3] [4]. Also, inadequate sleep quantity and quality have been associated with poor school performance, mental health problems, poor sociability, behavioral problems, the development of obesity and its accompanying comborbidities in adolescents [5]. There might also be a link between smoking and sleep disorders. Several studies have reported a positive association between second hand smoke (SHS) and inadequate sleep[6]. Alternate theories have also been put forth. Davila et al. reported that no significant association between SHS exposure and sleep disorders in a USpopulation based sample [7]. Among adolescents, though, SHS has been associated with greater sleep- onset latency, greater sleep disturbance, more frequent parasomnias ans more symptoms of sleep disordered breathing, like snoring. Self- reported snoring is associated with significant negative sleep time, decreased sleep time, failure to obtain enough sleep and unintentionally falling asleep [8]. Another major reason for the occurance of sleep disorders in adolescents may be due to the delayed secretion of melatonin by the pineal gland which is a small endocrine land at the base of the There is a change in the circadian rhythms of brain. adolescents. The various sleep disorders that were taken under the study are sleep apnea, delayed sleep phase insomnia, night terrors and narcolepsy. syndrome, Besides these, certain disorders like restless leg syndrome also prevail.

MATERIALS AND METHODS:

The questionnaire based study was carried out among healthy adolescents who did not exhibit any deformities or diseases to find out the occurrence of sleep disorders in a healthy population. The questionnaire comprised of 32 questions which were used to detect the prevelance of sleep disorders. The diseases that were included in the are: sleep apnea, delayed sleep phase syndrome, study insomnia, night terrors and narcolepsy. The questions were based on the symptoms exhibited by the individuals who had that particular disorder. The questionnaire was just a screening quesstionaire and cannot be used for diagnostic purposes.

The following questions were used to assess the occurance of sleep apnea:

- 1) Do others say that you snore while you are sleeping?
- 2) Do others say that you get irritated easily?
- 3) Do you feel drowsy after travelling 10 minutes in your school bus/ car?
- 4) Is your weight more than it is supposed to be?
- The follwing questions were asked to detect insomnia:
- 1) How long does it normally take for you to fall asleep?
- 2) Do thoughts flash across your mind before you fall asleep?
- 3) Do you wake up suddenly in the middle of the night and just cannot go back to sleep?4) Do you wake up in

the morning before your alarm goes off without intending to?

The following questions were asked to analyze the prevelance of Narcolepsy includes the following, whch mainly involves day time sleepiness:

1) Do you feel sleepy during the day even though you had sufficient amount of sleep the previous night?

2) Do you get dreams usually?

3) Do you have difficulty in staying awake during the day st school/ college?

The following questions were asked to detect Delayed Sleep Phase Syndrome (DSPS): 1) When do you off your lights and go to bed at night usually?

2) Do you use your mobile/ tab/ or any other electronic gadgets after switching off your lights?

3) How much hours of sleep do you usually get?

The questions used to predict the possibility of the occurance of night terrors are:

1) Do you get dreams when sleeping?

2) Have you woken up all of a sudden in the night startled because of a bad dream?

The data was categorized based on the symptoms of the specific diseases, and a conclusion was obtained based on it. It must be noted that this is not a diagnostic questionnaire and cannot be used to exactly predict the number of persons exhibiting sleep disorders. Based on the repsonses from the subjects, the statistics was done and the results was obtained in a systematic manner.

CONCLUSION:

Among adolescents, there are various symptoms indicating the widespread prevelance of varous sleeping disorders. Obstructive sleep apnea and insomnia are the two most common disorders. However, the symptoms of these disorders tend to overlap each other as they exhibit some similar symptoms and hence, detection of the exact number of adolescents detected with sleeping disorders is quite difficult. Females tend to show more symptoms of sleep disorders and experience difficulty in sleeping almost everyday. Around 20% of females have said that they are depressed often which may also affect their circadian rhythms. Hence any difficulty during sleep or abnormality during or after sleep might be recommended to consult a sleep specalist regarding this.

DISCUSSION:

Adolescence is the stage of life in which one is in an intermediate stage between childhood and adulthood. Many changes, both physically and emotionally take place during this transitional stage of life, which affects sleep pattern. There are various factors which may cause a change in the pattern of sleep in adolescents. Social factors include their school/ college activities, hanging out with friends, after school activites and so on. With certain hormonal changes included, the effects on their sleep habits naturally occur. It is found that adolescent's sleep pattern (i.e) their circadian rhythm is altered due to the delayed secretion of melatonin, which is a sleep inducing substance produced by the pineal gland situated at the base of the brain. This delays sleep and hence they just cannot fall asleep before a certain time whiich keeps the awake, which might help to the fact that about 24% of adolescents sleep only after 12 in the night. Also, 61% have said that they use some electronic gadget like mobile phones after switching odd the lights and falling asleep. This might even be a cause for delaying sleep. Sleep is characterized by a period of slow- wave sleep which lasts for about an hour or so, and then followed by Rapid Eye Movement sleep (REM sleep). In case of sleep disorders, this gets altered in certain cases. The various sleep disorders included under the study are discussed below:

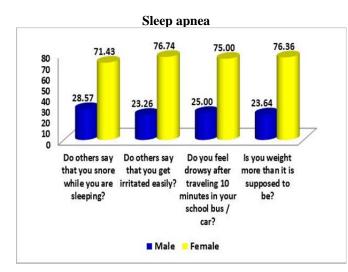
SLEEP APNEA: It is classified as a dyssomnia, which refers to abnormal behaviour that occurs during sleep. It is a sleeping disorder characterized by pauses in breathing (apnea) or moments of shallow which is known as breathing or infrequent breathing during sleep. Each apnea can last for several seconds and may occur at least 5 times an hour. When an apnea occurs, the intake of oxygen is reduced (hypoxia) and carbondioxide accumlates in the blood. This rise in the level of carbondioxide is sensed by the various chemoreceptors and the brain is signalled to increase oxygen intake by Breathing restores oxygen level to normal and breathing. the person falls back asleep. Three forms of sleep apnea have been identified, namely: central, obstructive and mixed.It can be treated by polysomnogram or by surgery[9].

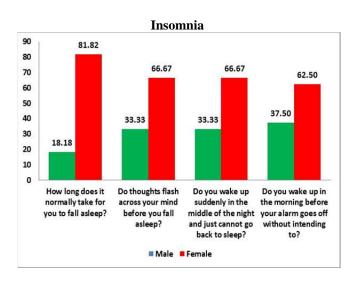
INSOMNIA: It is a sleep disorder that is characterized by difficulty in falling aslep, which is very common now a days. There are two types of insomnia, namely primary insomnia in which a person has sleep problems that are not directly associated with any other health problem, and secondary insomnia, in which the person has another disorder like asthma, arthritis, cancer etc. Insomnia can be treatd by the use of melatonin and valerin, though they are proven to have marked side effects. This is characterized by the inability to fall asleep, thoughts flashing across the mind before falling asleep, facing diffculty in relaxing and waking up earlier than expected to. Data says that females fall asleep later than men, which may indicate the prevelance of insomnia.

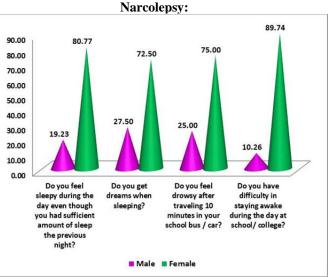
NARCOLEPSY: It is a chronic neurological disorder involving the loss of the brain's ability to regulate sleepwake cycle. It affects 0.03% to 0.16% of the general persons affected with population [10]. The sleep of narcolepsy begins with REM sleep within 5 minutes of falling asleep. Another common symptom of narcolepsy episode of muscle is cataplexy, which is a transient weakness in the face or limbs. This, however, is a variable symptom [11] and is seen only in 70% of the people who have narcolepsy. Narcolepsy is characterized significantly by "sleep attacks" during the day during which the person falls asleep suddenly during day time, and also the occurrence of dreams as soon as falling asleep. The affected people feel sleepy even during the day, and experience droswiness almost all the time. The main treatment for excessive day time sleepiness in narcoleptic persons is the use of Central Nervous System Stiimulants.

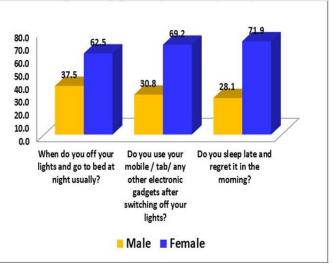
DELAYED SLEEP PHASE SYNDROME (DSPS): It is characterized by a remarked delay in the conventional bed time of the person. This in turn, leads to a difficulty in the waking up at the desired time. Also, their peak times of performance, body temperature and hormonal rhythms are delayed from societal norms [12]. Hence, non- attendance in school/ college was also inquired about in the questionnaire, along with the time the person gets to sleep usually and the time taken to actually fall asleep. The sleep pattern among adolescents with DSPS exhibited the expected sleep characteristics, with shorter sleep duration due to late bed time and early awakening to rush off to school/ college. Adolescents wit DSPS also had lower sleep efficiency and higher sleep deficiency [13]. According to Gradiser et al., it may be difficult to distinguish the charcteristics of DSPS from the sleep patterns that are normal during adolescence, and therefore one has a risk of underestimating th prevelance of DSPS [14].

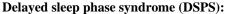
NIGHT TERRORS: It is mostly found in children of ages 8-12 and it doesn't prevail during adolescent period. However, certain symptoms might be exhibited, which the prevelance of night terrors. might not exacly portray The main symptom is the sudden waking up from sleep in the middlie of the night because of a bad dream. It typically occurs during the first hours of non- REM sleep. It has been found that only less than 10% of adolescents may exhibit symptoms of night terros. Findings suggest that the REM and non-REM sleep arousal may indicate continuous stress progressed at night [15]. This stress might attributable to being bulliIed at school. Conselling he maybe employed to dissolve the issue.

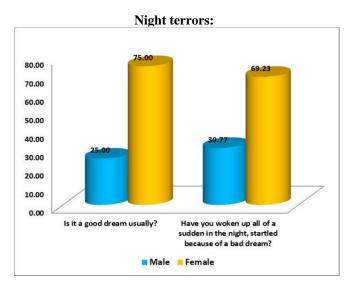












REFERENCES:

- A new questionnaire to detect sleeping disorders. Thomas Roth, Gary Zammit, Clete Kushida, Karl Doghramji, Susan D. Mathias, Josephine M. Wong, Daniel J. Buysse
- 2. Wake up America: a national sleep alert
- 3. Sleep problems and their correlates in a working population.
- 4. Utilization of health care services in patients with severe obstructive sleep apnea.

- Second hand smoke exposure, Restless sleep, and slep duration in adolescents Jennifer Schwartz, Joan L. Bottorff, and Chris G. Richardson
- A. Johansson, J. Ludvigsson, and G. Hermansson, "Adverse health effects related to tobacco smoke exposure in a cohort of three-year olds," *Acta Paediatrica*, vol. 97, no. 3, p. 354–357, 2008.
- E. P. Davila, D. J. Lee, L. E. Fleming et al., "Sleep disorders and secondhand smoke exposure in the U.S. population," *Nicotine and Tobacco Research*, vol. 12, no. 3, pp. 294–299, 2010.
- Sleep and health Implications of Snoring: A populational analysis. Neil Bhattacharyya, MD, FACS.
- Sleep disorders in older teen and children. Facts about pediatric sleep disorders from Cleveland clinic.
- Clinical and Neurobiological Aspects of Narcolepsy. Seiji Nishino, MD., Ph.D.
- Gelb M, GuilleminaultC, Kraeemer H, Lin S, Moon S, Dement WC, et al. Stability of cataplexy over several months- information for the design of therapeutic trials. Sleep 1994; 17; 265- 273. [Pubmed: 7939127]
- Delayed sleep phase syndrome is related to seasonal affective disorder. Heon- Jeong Lee, Katharine M. Rex, Caroline M. Nievergelt, John R. Kelsoe, and Daniel F. Kripke
- 13- Delayed sleep phase syndrome in adolescents: prevelance and correlates in a large level population based study. Borge Sivertsen, Stalle Pallesen, Kjell Morten Stormark, Tormod Boe, Astri J Lundervold, and Mary Hysing.
- 14- Gradsiar M, Gardner G, Dohnt H: Recent worldwide sleep patterns ans problems during adolescence: a review and meta- analysis of age, region, and sleep. Sleep Med 2011, 13: 193- 199.
- 15- Bullying and parasomnias: A longitudinal Cohort Study