

# How to calm your child after a nightmare

February 27 2024, by Ernie Mundell

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Most parents have experienced it: Your young child wakes up distraught, sure that the nightmare they've just suffered through is real.

Dr. Anis Rehman, an internal medicine specialist and consultant to the Sleep Foundation, says that about half of kids ages 3 to 6 experience

frequent nightmares, and about 20% of kids ages 6 to 12 do. Both sexes seem equally prone to bad dreams, although they may be more common in girls starting at about age 13.

There's also "night terrors"—minutes-long outbursts that can interrupt a child's sleep.

## **What are nightmares, anyway?**

According to the Sleep Foundation, a nightmare usually occurs during [rapid eye movement](#) (REM) sleep, which is typically a final phase of sleep. That explains why a child will often wake with a nightmare in the middle of the night or early morning.

Monsters, ghosts, barking dogs or prowling tigers, or people who seem threatening are often key players in kids' nightmares. Kids can also have scary dreams about being bullied or harassed, the foundation said.

As opposed to night terrors, typical nightmares do not involve the child vocalizing or acting out while asleep. However, once they wake up from their nightmare kids can feel vulnerable and anxious, with a rapid heartbeat. Sometimes nightmares can be so bad that a child develops a phobia about falling asleep, the foundation said.

## **'Night terrors'**

Night terrors—episodes of terror or panic while sleeping—are different from nightmares, Rehman explained. About 30% of kids are thought to experience night terrors, and they're most common between the ages of 3 and 7, usually resolving by age 10.

First off, they typically occur earlier in the sleep cycle, during non-REM

sleep.

And unlike nightmares, kids will often act out, shout or cry while asleep and having the dream. Sleepwalking can often coincide with night terrors.

Episodes of night terrors can last up to 90 minutes in some cases, the experts said.

## What parents can do

Occasional nightmares or night terrors can be scary for kids, but those fears can ebb once parents gently reassure a child that everything's OK. Explain to your child that nightmares aren't real, they're just thoughts made by the brain that are actually harmless.

Be careful though of having kids relying *too* much on your reassurance. Instead, encourage your child to learn to self-soothe themselves after waking up from a bad dream, the foundation advised.

For the same reason, Rehman says co-sleeping with your child after a nightmare probably isn't a great idea—getting kids dependent on co-sleeping might even boost [nightmare](#) frequency.

One proven strategy: Introducing kids to a "sleep partner" such as a doll or stuffed animal.

Parents "may tell the child that the sleep partner is scared, requiring the child to comfort it at night, or that the sleep partner is capable of protecting the child; both intervention strategies can assuage nighttime fears and improve the child's sleep quality," the foundation said.

If a parent knows that a child is experiencing fears or anger during the

day, talk those feelings over with them in a relaxed setting *before* bedtime. Calming anxieties may help prevent nightmares, the experts said.

"Deep breathing, [muscle relaxation](#) and other coping techniques may also help children sleep more soundly," the foundation said.

## **When is it time to see a doctor about nightmares?**

The foundation offered up two guidelines to know when nightmares are becoming more than an annoyance: If a child is having nightmares at least twice a week for six months or more, or if frequent nightmares continue past the age of 6.

That might signal the need for psychological help, the foundation said.

Common underlying issues or conditions that might spur frequent, long-term nightmares are [sexual assault](#), abuse and other types of trauma such as [post-traumatic stress disorder](#) (PTSD).

For kids with PTSD, one therapy involves "rehearsing" bad dreams during waking hours to lessen the odds they'll occur during sleep.

Kids who have frequent nightmares may act out in the evening, seeking to postpone sleep time, or demanding to sleep with a parent.

"Granting these requests can exacerbate the problem and solidify the [child](#)'s worries about sleeping, rather than alleviating them," the foundation said. "A strict bedtime schedule, reward-based positive reinforcement and other behavioral strategies are considered more effective. If these methods are not successful, a low-dose prescription of benzodiazepine may also be recommended."

Frequent, long-term night terrors may also need a doctor's help to resolve.

"In severe cases, doctors may prescribe medication to reduce night terror episodes," the foundation said. "Therapy may be recommended for severe cases. While medication is generally discouraged, [selective serotonin reuptake inhibitors](#) (SSRIs) [antidepressants] may be prescribed due to the widespread belief that night terrors are linked to serotonin levels."

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