

## Cari's Professional Book Club Notes

Book Title: Sleep-Wrecked Kids

Author: Sharon Moore



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Week 4: February 2, 2020

Chapter 3: Recognizing the Red Flags

### Important Take-Aways:

1. This chapter outlines the red flags that are clues about the health of the child's sleep and airway. The author encourages parents to focus on these questions:
  - a. How does my child behave?
  - b. How does my child look?
  - c. How does my child sound?
  - d. How are the muscles in my child's upper airway working?
  - e. What medical, dental or physical condition(s) does my child have?
2. Parent need to look for red flags in a number of areas including bedtime, night-time behaviors, and daytime behaviors. The author reiterates that behavior daytime behavior issues are a red flag for possible sleep disorder.
3. Below are some questions that we as professionals can ask parents (I am going to add these questions to my case history form). Unfortunately, most parents don't know the answer to questions about how the child looks or sounds when sleeping. These questions can help parents know what to start looking for.
  - a. Does your child have difficulty getting to sleep?
  - b. Does your child have difficulty staying asleep?
  - c. Is your child a noisy or restless sleeper?
  - d. Does your child walk or talk in his/her sleep?
  - e. Does your child sleep with his/her mouth open?
  - f. Does your child wake groggy and moody?
  - g. How many hours sleep does your child get in a 24-hour period, including naps?
4. If the parent answers "yes" to any of the questions "a" through "f" above, then it would be wise to have the parent complete the Sleep History Screening form that the author provides in the book on page 85. This screening form could then be

taken to the pediatrician for an accurate account of why the team is concerned about the child's sleep.

5. Behavioral red flags to look for:
  - a. Night-time behaviors
    - o stalling tactics
    - o fear of going to bed
    - o inability to switch off or slow down enough to fall asleep
    - o inability to stay asleep
    - o restless sleep
  - b. Daytime behaviors
    - o difficulty concentrating and focusing
    - o aggression
    - o impulsivity
    - o interrupting
    - o talking out of turn
    - o inability to sit still
    - o or the opposite...lethargic and clumsy
  
6. If the child is just having a bad day, that's one thing. But if the child exhibits these behaviors regularly, then it's time to think about why. If the behaviors cannot be explained by a new major life event, such as moving into a new house or welcoming a new baby into the family, then these may be more ingrained behavioral habits that need to be addressed.
  
7. Environmental factors that may be affecting sleep:
  - a. The sleep environment:
    - o Is the room noisy at sleep time?
    - o Is the room too hot or too cold?
    - o Is there a pet in the room?
    - o Is it too bright in the room? (no window blinds)
    - o Is there a TV or iPad in the room?
    - o Is the night-time environment too chaotic?
    - o Does the child share room with siblings?
    - o Does the child complain about uncomfortable pajamas?
  - b. The child's sleep routine:
    - o Does the child go to bed a different time every night?
    - o Is the bedtime routine unpredictable?
    - o Are there wind-down activities prior to bed (such as bath, story, rocking, etc.)?
    - o Does the child fall asleep in places other than own bed?
  
8. Airway red flags that may be affecting sleep:
  - a. Once asleep, I hear my child:
    - o gasping for air
    - o snoring
    - o making choking sounds
    - o breathing loudly
    - o grinding teeth
  - b. Once asleep, I see my child:

- o working hard to breathe
- o moving their body in odd ways
- o extending his/her neck back
- o sweating
- o tossing and turning
- o drooling
- c. Once asleep my child:
  - o has nightmares
  - o walks or talks in his/her sleep
  - o wets the bed
- d. On waking up, my child:
  - o has morning headaches
  - o is moody
  - o looks tired
  - o is groggy
  - o is tired in the day, despite long sleep hours
  - o has poor morning appetite

9. Myofunctional red flags that may be affecting sleep:

- a. How does the child look?
  - o puffy eyes
  - o dark circles
  - o dry lips
  - o short upper lip that barely moves
  - o tongue sits low and forward
  - o tongue is always visible
  - o tendency to drool
- b. How does the child sound?
  - o speech distortions because of tongue position
  - o speech sounds (/t, d, n, f, s, z/) are made with the tongue too far forward
  - o resonance is off: either sounds stuffed up or has air escaping from the nose when talking
  - o has a deep or hoarse voice
  - o has coughing and throat clearing habits
  - o has audible breathing
- c. How do the muscles of the face, mouth and throat work?
  - o is a mouth breather
  - o chews with an open mouth
  - o has food left over in the mouth after swallowing
  - o chews noisily
  - o avoids eating crunch or chewy foods
  - o eats mostly soft texture foods
  - o has a tongue thrust swallow
  - o tongue is visible while talking/eating
  - o has their tongue out a lot while playing or concentrating
  - o has a forward head posture

10. Medical red flags that may be affecting sleep:

- a. craniofacial syndrome
- b. neuromuscular disease
- c. genetic disorder
- d. reflux
- e. autism spectrum or other developmental delays

11. The author provides detailed checklists for parents to complete to help identify the above red flags (they are on pages 93-102). These charts alone are reason enough to purchase your own copy of this book!