



Diseases and Conditions

Sleep terrors (night terrors)

By Mayo Clinic Staff

Sleep terrors are episodes of screaming, intense fear and flailing while still asleep. Also known as night terrors, sleep terrors often are paired with sleepwalking. Like sleepwalking, sleep terrors are considered a parasomnia — an undesired occurrence during sleep.

Although sleep terrors are more common in children, they can also affect adults. A sleep terror episode usually lasts from seconds to a few minutes, but they may last longer.

Sleep terrors are relatively rare, affecting only a small percentage of children — often between ages 4 and 12 — and a smaller percentage of adults. However frightening, sleep terrors aren't usually a cause for concern. Most children outgrow sleep terrors by their teenage years.

Sleep terrors may require treatment if they cause problems getting enough sleep or they pose a safety risk.

Sleep terrors differ from nightmares. The dreamer of a nightmare wakes up from the dream and may remember details, but a person who has a sleep terror episode remains asleep.

Children usually don't remember anything about their sleep terrors in the morning. Adults may recall a dream fragment they had during the sleep terrors. Also, nightmares generally occur in the last half of the night, while sleep terrors occur in the first half of the night.

During a sleep terror episode, a person might:

- Sit up in bed
- Scream or shout
- Kick and thrash
- Sweat, breathe heavily and have a racing pulse
- Be hard to awaken, but if awakened be confused
- Be inconsolable

- Stare wide-eyed
- Get out of bed and run around the house
- Engage in aggressive behavior (more common in adults)

When to see a doctor

Occasional sleep terrors aren't usually a cause for concern. If your child has sleep terrors, you can simply mention them at a routine well-child exam. However, consult your doctor if sleep terrors:

- Become more frequent
- Routinely disrupt sleep or the sleep of other family members
- Cause you or your child to fear going to sleep
- Lead to dangerous behavior or injury
- Appear to follow the same pattern each time
- Persist beyond the teen years or begin in adulthood

Various factors can contribute to sleep terrors, such as:

- Sleep deprivation and extreme tiredness
- Stress
- Fever (in children)
- Sleeping in unfamiliar surroundings
- Lights or noise
- An overfull bladder

Sleep terrors sometimes are associated with underlying conditions that affect sleep, such as:

- Sleep-disordered breathing — a group of disorders characterized by abnormal breathing patterns during sleep, the most common of which is obstructive sleep apnea
- Restless legs syndrome
- Migraines
- Head injuries
- Some medications

Sleep terrors tend to run in families. Some adults who have sleep terrors may have a history of depressive or anxiety disorders, although most don't have a mental health condition.

Some complications that may result from experiencing sleep terrors include:

- Excessive daytime sleepiness, which can lead to difficulties at school or work, or problems with everyday tasks
- Disruptions to family members
- Embarrassment over sleep terrors
- Injury to oneself or others

For children, sleep terrors tend to decrease by the time they're teenagers. However, if you have concerns about safety or underlying conditions for you or your child, you may want to consult your doctor, who may refer you to a sleep specialist.

It's a good idea to prepare for your appointment. Here's some information to help you.

What you can do

- **Keep a sleep diary** for two weeks before your appointment to help your doctor understand what's causing the sleep terrors. In the morning, you record as much as you know of the bedtime ritual, quality of sleep, and so on. At the end of the day, you record behaviors that may affect sleep, such as caffeine consumption and any medications taken.
- **Make a list of any symptoms you or your child is experiencing**, including any that may seem unrelated to the reason for the appointment.
- **Bring key personal information**, including any major stresses or recent life changes.
- **Make a list of all medications**, vitamins or other supplements that you or your child takes, and the dosages.
- **Bring a family member or friend along**, if possible, to help you remember what the doctor says.
- **Make a list of questions to ask** your doctor to help make the most of your time together.

For sleep terrors, some basic questions to ask your doctor include:

- What is likely causing these symptoms?
- What are other possible causes?
- What kinds of tests are needed?
- Is the condition likely temporary or chronic?
- What's the best course of action?
- What are the alternatives to the primary approach you're suggesting?
- Are there any restrictions that need to be followed?
- Do you recommend seeing a specialist?
- Are there any brochures or other printed material that I can have? What websites do you

recommend?

Don't hesitate to ask other questions that occur to you.

What to expect from your doctor

Your doctor is likely to ask you several questions, including:

- When did the sleep terrors begin?
- How often do the sleep terrors occur?
- Have there been sleep problems in the past?
- Does anyone else in your family have sleep problems?

Sleep terrors are usually diagnosed by your doctor based on your description of the events. Your doctor may do a physical or psychological exam to identify conditions that may be contributing to the sleep terrors. If the diagnosis isn't clear or your doctor suspects sleep-disordered breathing, a sleep study may be recommended.

Sleep study

A sleep study (polysomnography) is a test used to diagnose underlying sleep disorders, such as obstructive sleep apnea, that may trigger sleep terrors. To participate in the polysomnography, you'll spend the night in a sleep lab.

During the test, sensors are placed on your head and body to record your brain waves, blood oxygen level, heart rate and breathing, as well as eye and leg movements. A video camera records your sleep. Your doctor will review the information to determine whether you or your child has a sleep disorder.

Treatment for infrequent sleep terrors isn't usually necessary.

During your child's sleep terror, simply wait it out. It may be distressing to watch, but it does not harm the child. You might gently restrain your child and try to get him or her back into bed. Speak softly and calmly. Shaking your child or shouting may make things worse. Usually the episode will eventually stop on its own.

Treatment may be needed if the sleep terrors cause significant disruption or problems with daytime function or threaten safety. Treatment options include:

- **Treating an underlying condition.** If the sleep terrors are associated with an underlying medical or mental health condition or another sleep disorder, such as obstructive sleep apnea, treatment is aimed at the underlying problem.
- **Improving sleep habits.** Addressing issues such as too little sleep may help reduce the incidence of sleep terrors.
- **Addressing stress.** If stress or anxiety seems to be contributing to the sleep terrors,

your doctor may suggest meeting with a therapist or counselor. Cognitive behavioral therapy, hypnosis, biofeedback and relaxation therapy may help.

- **Medication.** Medication is rarely used to treat sleep terrors, particularly for children. If necessary, however, use of benzodiazepines may be effective.

If sleep terrors are a problem for you or your child, here are some things to try:

- **Make the environment safe.** To help prevent injury, close and lock all windows and exterior doors at night. You might even lock interior doors or place alarms or bells on the doors. Block doorways or stairways with a gate, and move electrical cords or other objects that pose a tripping hazard. Avoid using bunk beds. Place any sharp or fragile objects out of reach, and lock up all weapons.
- **Get more sleep.** Fatigue can contribute to sleep terrors. If you are sleep deprived, try an earlier bedtime and a more regular sleep schedule. Sometimes a short nap may help.
- **Establish a regular, relaxing routine before bedtime.** Do quiet, calming activities — such as reading books, doing puzzles or soaking in a warm bath — before bed. Meditation or relaxation exercises may help, too.
- **Put stress in its place.** Identify the things that stress you out, and brainstorm possible ways to handle the stress. If your child seems anxious or stressed, talk about what's bothering him or her.
- **Look for a pattern.** If your child has sleep terrors, keep a sleep diary. For several nights, note how many minutes after bedtime a sleep terror episode occurs. If the timing is fairly consistent, wake your child about 15 minutes before you expect a sleep terror episode. Keep your child awake for five minutes, and then let him or her fall asleep again.

Keep in mind that sleep terrors typically aren't a serious condition — and they usually go away on their own.

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