Normal sleeping patterns 0-16 years

Your child needs plenty of sleep to allow their body and mind to rest and to grow and develop.

For many families bedtime can be frustrating and no fun. Most children have the ability to sleep well, so understanding what is normal and when to seek help is important.

**Newborn sleep**

Full-term babies will sleep 16 to 20 hours per day. They have 3 different sleep states and spend half their time asleep dreaming — called REM sleep (Rapid Eye Movement Sleep or Active Sleep). In this type of sleep they will suck, grimace, smile and sometimes twitch their fingers and feet. Sleep cycles consisting of REM and NREM sleep (Non-REM is the sleep that is not REM sleep) are more evenly distributed through the night and are shorter in duration compared to older children. They wake to feed every 3—5 hours. Premature babies may sleep 20—22 hours per day with only very short periods of wakefulness. During REM sleep all newborn babies have a pattern of “brief pauses in breathing”. Some babies also have Periodic Breathing where they take a few breaths, pause, take a few breaths, pause and so on—this often can go on for long periods of sleep and can be quite normal, improving with age and maturity.

**3 to 6 months**

Babies start to spend more time awake, moving, rolling and learning. The time they spend asleep starts to reduce. Gradually, a baby’s sleep becomes more like that of a child and by about 6 months, all of the four sleep stages (N1 N2 N3 and REM) are defined. Infants may still wake for feeding and comfort every 4 to 6 hours. Their periodic breathing stops by 6 to 8 months of age.

**Toddlers and pre-schoolers**

At 2 years of age, 12 out of 24 hours is spent asleep without waking. A nap during the day averages one and a half hours ranging up to about 2.5 hours. By 3 years of age the daytime nap is reducing and then stops. The percentage of time spent in Dream (REM) sleep continues to decrease while the other stages of sleep lengthen and become more consolidated.

**School age children**

In primary school the average child sleeps 10 to 11 hours at night without waking, with a gradual decrease into later childhood. By 12 years of age, slow wave (deep) sleep happens mainly in the first half of the night while dream sleep (REM) decreases to adult levels of about 15-20% of the total time spent asleep. “Night terrors” — where the child appears awake but seems “not to be with it”, is frightened and is inconsolable — are not uncommon from 4 to 8 years of age.

**Adolescents**

As children reach puberty, they often do not get as much sleep as they need. The pressures of schoolwork, social life and peer contact can make adolescents go to bed late and sleep in half the day. This sleep pattern should not be encouraged as it can lead to an altered sleep phase where your child wakes late and is unable to easily fall asleep at night. Going to sleep late makes it difficult for teenagers to get the 9 to 9.5 hours of sleep they need each night.
Try to help your child strike a sensible balance between late night socialising and sleeping. A normal young adult sleep pattern should be in place by 16 years of age. Dream sleep (REM) occurs 80 to 90 minutes after falling asleep and continues to cycle over 6—8 hours.

**Sleep hygiene**

Parents should encourage good sleep practices from an early age. A consistent bedtime in a warm (an ideal temperature is around 21°C), dark, comfortable room with light blankets and a firm mattress; helps children to feel safe and secure at night. Avoid using electronic media including television, computers and mobile phones for at least an hour before bedtime.

Many children will wake after one or two cycles of sleep and wander to their parent’s bedroom and climb into bed with them. Children should not be punished or scolded for this, as they may not be fully awake at the time. The best remedy is to carry or walk them back to their own bed and settle them back to sleep with the minimum of fuss and attention.

**Symptoms that may indicate abnormal sleep**

- Snoring.
- Sweating.
- Restlessness.
- Morning headaches.
- Daytime sleepiness.
- Bedwetting after 8 years of age or after a 6-week period of dryness.

**If severe these symptoms may need attention**

- Sleep walking and talking.
- Head rocking/banging.

**Treatment for sleep problems**

- Like all physical and emotional disorders, sleep disorders need to be properly investigated, diagnosed and treated.
- Discuss the problem with your general practitioner and they can refer you and your child on to a Paediatrician (or Sleep Physician) for assessment.

**Remember**

- Every age group has a different pattern of sleep; if you are concerned speak to your GP and seek a referral to a Paediatrician.