

TOOLS



Use of the 'BEARS' sleep screening tool



The BEARS appears to be a user-friendly pediatric sleep screening tool which significantly increases the amount of sleep information recorded as well as the likelihood of identifying sleep problems

Sleep Medicine 6 (2005) 63–69

	Preschool (2–5 years)	School-aged (6–12 years)	Adolescent (13–18 years)
<i>Bedtime problems</i>	Does your child have any problems going to bed? Falling asleep?	Does your child have any problems at bedtime? (P) Do you have any problems going to bed? (C)	Do you have any problems falling asleep at bedtime? (C)
<i>Excessive daytime sleepiness</i>	Does your child seem over tired or sleepy a lot during the day? Does she still take naps?	Does your child have difficulty waking in the morning, seem sleepy during the day or take naps? (P) Do you feel tired a lot? (C)	Do you feel sleepy a lot during the day? in school? while driving? (C)



**Preschool
(2–5 years)**

**School-aged
(6–12 years)**

**Adolescent
(13–18 years)**

**Awakenings
during the night**

**Does your child
wake up a lot at
night?**

**Does your child
seem to wake
up a lot at
night? Any
sleepwalking or
nightmares? (P)
Do you wake up
a lot at night?
Have trouble
getting back to
sleep? (C)**

**Do you wake up
alot at night?**

**Have trouble
getting back to
sleep? (C)**

**Regularity and
duration of
sleep**

**Does your child
have a regular
bedtime and
wake time?**

What are they?

**What time does
your child go to
bed and get up
on school days?
weekends?**

**Do you think
he/she is getting
enough sleep?
(P)**

**What time do
you usually go
to bed on school
nights?**

**Weekends?
How much
sleep do you
usually get? (C)**



**Preschool
(2–5 years)**

**School-aged
(6–12 years)**

**Adolescent
(13–18 years)**

**Sleep-disor-
dered breathing**

**Does your child
snore a lot or
have difficulty
breathing at
night?**

**Does your child
have loud or
nightly snoring
or any breath-
ing difficulties
at night? (P)**

**Does your teen-
ager snore
loudly or
nightly? (P)**





Erasmus +



SLEEP SELF- REPORT (SSR)

Sleep routines:

1. Do you fall asleep in the same bed every night
2. Do you fall asleep alone
3. Do you fall asleep in parent's, brother's or sisters bed?

Sleep anxiety:

4. Do you have special thing (doil, blanket,..) you bring to bed?
5. Are you afraid of the dark?
6. Are you afraid of sleeping alone?
7. Do you have nightmares?
8. Do you sometimes go to someone's bed during the night?

Sleep quality:

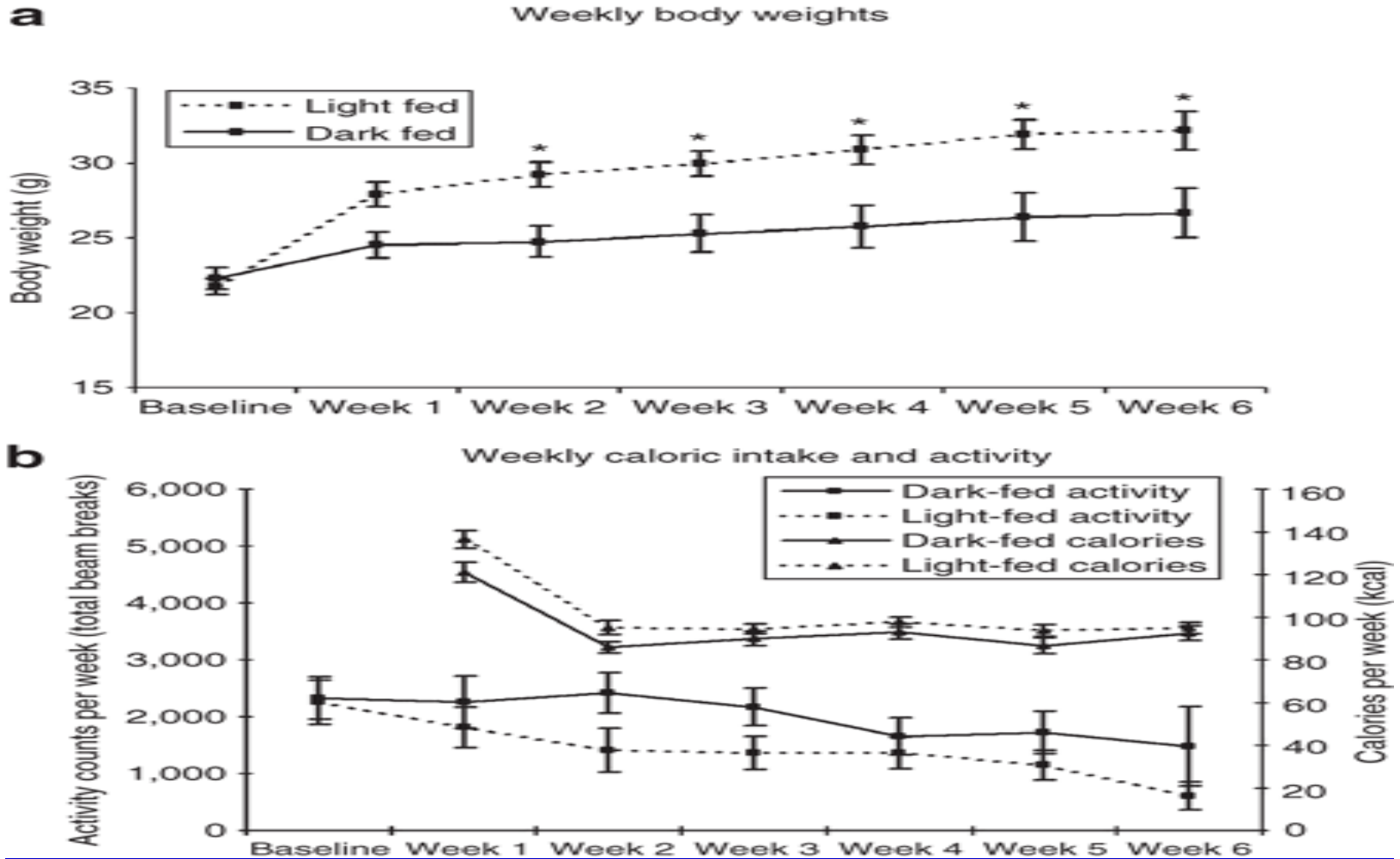
9. Do you think you sleep too little?
10. Do you wake up at night when your parents think you're asleep?
11. Do you have trouble falling back to sleep if you wake up during the night?
12. Does pain wake you up at night?
13. Do you feel sleepy during the day?

Bedtime refusal:

14. Do you fight with your parents about going to bed?
15. Is it hard for you to go to bed?
16. Do you stay up late when your parents think you are asleep?



Circadian Timing of Food Intake Contributes to Weight Gain



The present results show that simply modifying the time of feeding alone can greatly affect body weight.

The Sleep Disturbance Scale for Children (SDSC.)

An instrument to evaluate sleep disturbances in childhood and adolescence



1. How many hours of sleep does your child get on most nights.	① 9-11 hours	② 8-9 hours	③ 7-8 hours	④ 5-7 hours	⑤ less than 5 hours
2. How long after going to bed does your child usually fall asleep	① less than 15'	② 15-30'	③ 30-45'	④ 45-60'	⑤ more than 60'

	⑤ Always (daily)				
	④ Often (3 or 5 times per week)				
	③ Sometimes (once or twice per week)				
	② Occasionally (once or twice per month or less)				
	① Never				
3. The child goes to bed reluctantly	①	②	③	④	⑤
4. The child has difficulty getting to sleep at night	①	②	③	④	⑤
5. The child feels anxious or afraid when falling asleep	①	②	③	④	⑤
6. The child startles or jerks parts of the body while falling asleep	①	②	③	④	⑤
7. The child shows repetitive actions such as rocking or head banging while falling asleep	①	②	③	④	⑤
8. The child experiences vivid dream-like scenes while falling asleep	①	②	③	④	⑤
9. The child sweats excessively while falling asleep	①	②	③	④	⑤
10. The child wakes up more than twice per night	①	②	③	④	⑤
11. After waking up in the night, the child has difficulty to fall asleep again	①	②	③	④	⑤
12. The child has frequent twitching or jerking of legs while asleep or often changes position during the night or kicks the covers off the bed.	①	②	③	④	⑤
13. The child has difficulty in breathing during the night	①	②	③	④	⑤
14. The child gasps for breath or is unable to breathe during sleep	①	②	③	④	⑤
15. The child snores	①	②	③	④	⑤
16. The child sweats excessively during the night	①	②	③	④	⑤
17. You have observed the child sleepwalking	①	②	③	④	⑤
18. You have observed the child talking in his/her sleep	①	②	③	④	⑤
19. The child grinds teeth during sleep	①	②	③	④	⑤
20. The child wakes from sleep screaming or confused so that you cannot seem to get through to him/her, but has no memory of these events the next morning	①	②	③	④	⑤
21. The child has nightmares which he/she doesn't remember the next day	①	②	③	④	⑤
22. The child is unusually difficult to wake up in the morning	①	②	③	④	⑤
23. The child awakes in the morning feeling tired	①	②	③	④	⑤
24. The child feels unable to move when waking up in the morning	①	②	③	④	⑤
25. The child experiences daytime somnolence	①	②	③	④	⑤
26. The child falls asleep suddenly in inappropriate situations	①	②	③	④	⑤
Disorders of initiating and maintaining sleep (sum the score of the items 1,2,3,4,5,10,11)					
Sleep Breathing Disorders (sum the score of the items 13,14,15)					
Disorders of arousal (sum the score of the items 17,20,21)					
Sleep-Wake Transition Disorders (sum the score of the items 6,7,8,12,18,19)					
Disorders of excessive somnolence (sum the score of the items 22,23,24,25,26)					
Sleep Hyperhydrosis (sum the score of the items 9,16)					
Total score (sum 6 factors' scores)					



- (1) Is an easy-to-fill form to collect data on sleep behaviour of children and adolescents;
- (2) the internal consistency is good in spite of the relative heterogeneity of the items;
- (3) the six factors extracted, representing the most common areas of sleep disorders in childhood and adolescence, could be used to design a 'child's sleep disturbance profile'.





Posts / Actions / Strategies

Spanish group (Silla Team)





CONCLUSIONES:

- A) Desayuno equilibrado y en familia.
- B) Tecnologías limitadas por la noche.
- C) Pactar horarios.
- D) Evitar sedentarismo.
- E) Alumnos mayores que expliquen a los menores.

- A) Family and balanced breakfast.
- B) Technologies limited night.
- C) Negotiate and agree on times.
- D) Avoid a sedentary lifestyle.
- E) Older students explain to younger ones.



INFANTIL



Pautas:

- La familia fija el horario de:
 - a) Ducha
 - b) Cena en familia
 - c) Higiene bucodental – necesidades fisiológicas previas a dormir
 - d) Lectura con poca luz
- Eliminar la televisión después de la ducha
- Recomendar a los padres que no den a los niños productos estimulantes (gaseosos, chocolates...)
- Recomendar dormir entre 10 y 12 horas

Guidelines:

- The family sets the schedule:
 - a) Shower
 - b) Family dinner
 - c) Oral Hygiene - previous physiological needs to sleep
 - d) Reading in dim light
- Remove the TV after shower
- Tell parents not to give children stimulants (gaseous, chocolates ...)
- Tell sleep 10 to 12 hours



Actividades antes de dormir:

Cena en familia sin TV.
Preparar el material escolar del día siguiente.
Actividad relajante
(lectura – música - achuchones)
Establecer hora tope.
Disminución exposición lumínica.



Activities bedtime:

Family dinner without TV.
Preparing school supplies for tomorrow.
(Reading - Music - hugs)
Set a limit time.
Decrease exposure to light.