

Who are afraid of the dark ? are you ?

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Night terrors are a type of parasomnia or partial-sleep disorder, characterised by bouts of screaming, intense fear and flailing while still asleep. Also known as sleep terrors, night terrors are commonly observed in children and are often accompanied by somnambulism or sleepwalking, in one-third of the cases. An episode of night terror generally lasts from a few seconds to a few minutes, but some episodes may continue for a prolonged period. Night terrors take place in the deepest stage of sleep and are marked by an abrupt arousal. It generally occurs within the first hour of sleep. The person, under the bout, looks terrified and may sit upright in acute fright, shrieking, thrashing, crying inconsolably and flailing. Night terrors, in children occur as a result of immature sleep patterns with a sudden activation of the flight or fight reaction.

Studies show that although people of all age groups are susceptible to night terrors, it is particularly observed in children aged between three and five. Approximately 40 percent children and 3 percent adults suffer from night terrors. A bout of sleep terror usually strikes fifteen minutes to one hour after falling asleep. Like most parasomnias, night terrors too are dissociated sleep states which occur during the shift from wakefulness to NREM (Non-rapid eye movement) sleep or wakefulness to REM (Rapid eye movement) sleep, they hardly ever occur during naps. Some people are oblivious to their fit of night terror whereas the others vaguely remember their ordeal.

In children, such partial confusional arousals could be stimulated by stress, anxiety and fatigue. It could also be triggered due to a loud noise or other unusual interruptions, or even a change in the usual sleeping pattern, or a full bladder. In adults, night terrors are mostly associated with medicinal side-effects, traumatic experiences or post-traumatic stress, and therefore could be more critical. During the fit of night terror, the person feels extremely bewildered and disoriented, along with profuse sweating, a rapid rise in the heartbeat, fast breathing and an elevated blood pressure. It is often seen that night terrors mostly run in families, even though no scientific evidence of involvement genetic factors has been found. In children, parasomnia is mostly a developmental process and not particularly a consequence of mental or physical ailment. Such nocturnal episodes of night terrors cease to persist after the age of 12, or at least decrease in frequency. Hence, occasional sleep terrors are not a matter of severe concern in most cases.

Sleep terrors may require medical intervention in case the sufferer doesn't get enough sleep and as a result gets fatigued, or they pose a risk to themselves or their surroundings due to aggressive fits. Also if the bouts become frequent and continue beyond 12 years of age, the advice of a doctor should be sought. During a bout of night terror, one shouldn't try to awaken the person. It might prove to be futile to try to console such a person, though holding the person and speaking softly might help them to fall back to sleep.

In severe cases, hypnosis, biofeedback and various other relaxation techniques are to decrease or stop such episodes of night terrors. For children, soothing music or bedtime stories are advised to lull a child into deep slumber. Additionally, doctors also advise against taking heavy or spicy meals before bedtime as indigestion also acts as a trigger for parasomnia.

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