

## Somnambulism (Sleepwalking)

**Sleepwalking/Somnambulism:** (from Latin: somnus = sleep, ambulus = walking) an arousal from NREM sleep followed by walking or other complex behaviors. Also known as Somnambulism, in this parasomnia a person gets out of bed and performs activities such as walking because they are neither fully awake nor asleep. It is very common in children, although some adults experience them.

## Features

Sleepwalking, like other “classical” arousal disorders (Sleep Terrors and Confusional Arousals) occurs during the transition from sleep to wakefulness. Episodes arise after a cycle of deep sleep, usually in the first third of the night. Behavior varies greatly. Some people jump out of bed quickly and begin moving about. Others sit up in bed first and look around as if confused. Sleepwalkers tend to have wide open eyes that look “glassy” or stare through people.

Actions range from mundane to boisterous. This may include eating or performing routine chores such as getting dressed. The activity will not likely make complete sense. For example, the sleeper may climb out of a window, urinate in a closet, or place household objects into the refrigerator. Some people later report a vague memory of running from danger.

Verbal responses may be ignored or have nothing to do with the question asked. Sleepwalkers tend to speak slowly using incomplete sentences.

Behavior may also vary from harmless to dangerous. Wandering outdoors in cold weather or without wearing clothing, driving a car, or walking into traffic while sleepwalking could lead to injury or legal consequences.

## Diagnosis

Children who sleepwalk normally do not require medical intervention, unless their behavior becomes too

aggressive for parents to manage. Adults who sleepwalk are more likely to benefit from the advice of a doctor because they are more likely to cause injury or to have an underlying medical problem, such as obstructive sleep apnea (OSA).

Diagnosis begins with a careful medical history to determine whether the episodes are secondary to another health condition, or a side effect of medication. Providing a two week sleep log of your sleep habits (or those of your child) and possibly video tapes will demonstrate the sleepwalking behavior to your doctor or sleep specialist. In adults, an overnight sleep study will conclusively identify this sleep disorder, which can look similar to sleepwalking and confusional arousals.

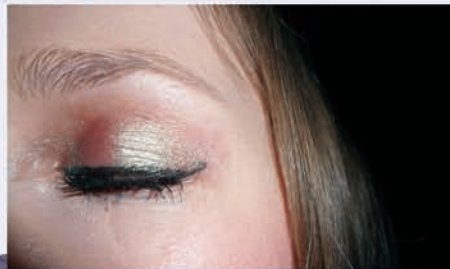
The sleep study involves an overnight polysomnogram, which records brainwaves, muscular activity and breathing during sleep. The sleep study may also record sleepwalking episodes on videotape.

## Treatment

Sleepwalking in children tends to fade on it's own by the teen years. Treating other sleep problems such as sleep apnea may be enough to restore normal sleep patterns.

Behavioral Modification is an important part of treating both adults and children. Incorporating healthy sleep habits will eliminate unnecessary interruptions during sleep. Parents can take specific measures to ensure their child's safety during an episode.

- > Keep in mind that your child will not likely remember the episode.
- > Respond in a calm, reassuring manner to avoid frightening her.
- > Try not to awaken your child.
- > Watch your child until she returns to sleep.



## Do I Sleepwalk?

Sometimes I get out of bed and walk around while still sleeping.

I get out of bed at night and engage in physical activity.

I have performed actions upon awakening that could be dangerous.

My behavior has also been described as inappropriate or not making sense.

I am confused upon awakening from these episodes.

I have little or no recollection of the experience.

This pattern of behavior occurs on a regular basis.

## Sleepwalking Mechanics

Sleepwalking is specific to a certain portion of sleep. Sleep is divided into stages or degrees of sleep. The brain behaves differently during each sleep stage. Like other NREM Arousal Disorders, Sleepwalking occurs during stages 3-4 of NREM sleep, the deepest sleep.

Sleepwalking episodes may look a lot like someone is acting out a dream or nightmare. However, NREM sleep is not associated with much dreaming. Areas of the brain involved with movement and physical activity become “awakened” or activated, while other areas remain asleep. However, the person is not awake enough to be fully conscious of the behavior, nor is the episode likely to be remembered.



# SleepCaptions

## Risks for Sleepwalking

- ✓ Age (children and adults under 35)
- ✓ Rotating or night shift work
- ✓ Hyperthyroidism
- ✓ Encephalitis
- ✓ Stroke
- ✓ Digestive bloating
- ✓ Fevers in children
- ✓ Sleep Deprivation
- ✓ Stress
- ✓ Bi-polar and depressive disorders
- ✓ Other sleep disorders
- ✓ The use of psychotropic medications
- ✓ Drug or alcohol abuse

## Effects of Sleepwalking

- ✓ Injury to oneself
- ✓ Injury to bed partner or others
- ✓ Destruction of nearby property
- ✓ Increasingly worse episodes

## Need more information?

Visit the SleepMedicine Education web site at: [sleepmedicineeducation.com](http://sleepmedicineeducation.com) for additional publications. See also:

**SleepIssues:** “Out of Sync”

**SleepGuides:** “Treating Sleep Disorders”

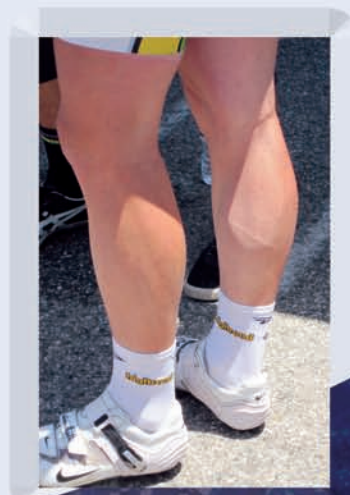
To schedule an appointment at any Sleep Medicine Centers location, visit

[www.sleepmedicinecenters.com](http://www.sleepmedicinecenters.com)

or call:

(716)92-DREAM

(877)53-SNORE



## Did You Know?

A 1997 Finnish study reported that 6.9% of female children and 5.7% of male children sleepwalk, compared to 3.1% of females adults and 3.9% of male adults.

The American Academy of Sleep Medicine reports that the rate of sleepwalking in children is as high as 17%, with a peak between 8 and 12 years of age.

Approximately 2% of adults surveyed in the United Kingdom reported that they sleepwalk.

A study of “quiet” sleepwalking in Sweden reported a prevalence of 40%, with a yearly prevalence of 6-17%.