



ECHO IDAHO: **Autism**

Sleep and Autism: How to support families

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Everything Sleep Idaho

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Overview

- Sleep and ASD
- 4As of Autism and Sleep
- Tips for Success
- Treatment Options

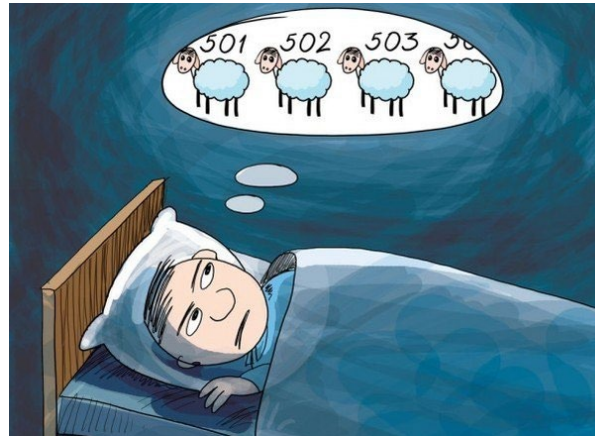


Sleep Difficulties and ASD

- Sleep difficulties are a common comorbidity in ASD
- 50-80% of children with ASD have sleep difficulties
- Challenging daytime behaviors can be a result of sleep difficulties

What is Insomnia?

- Trouble falling asleep (onset)
- Trouble staying asleep (maintenance)
- Early Morning awakenings



Ask

- Every child with ASD should be screened for insomnia at EACH visit
- Ask
 - Bedtime resistance
 - Snoring
 - Nighttime awakenings
 - Bedtime routine
 - Parent Concern
- Child's Sleep Habits Questionnaire (CSHQ)
- Ask the parents specific questions
 - Does your child fall asleep within 20 minutes?
 - Does your child fall asleep in your bed or their sibling's bed?
 - Do you feel your child gets enough sleep?
 - Does your child wake during the night? If so, how many times?

Assess

- Gather data
 - Sleep log
 - Environment
 - Bedtime associations
 - Medical comorbidities
 - GERD, anxiety, medications, seizures

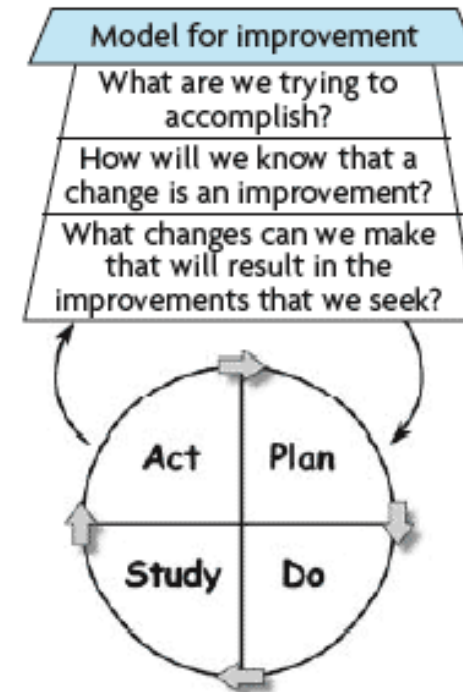
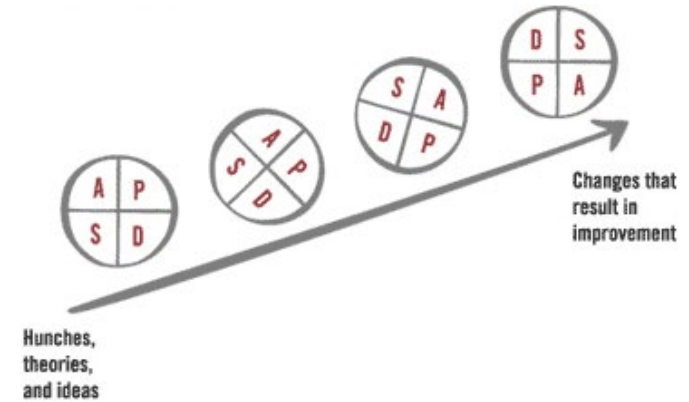


Address

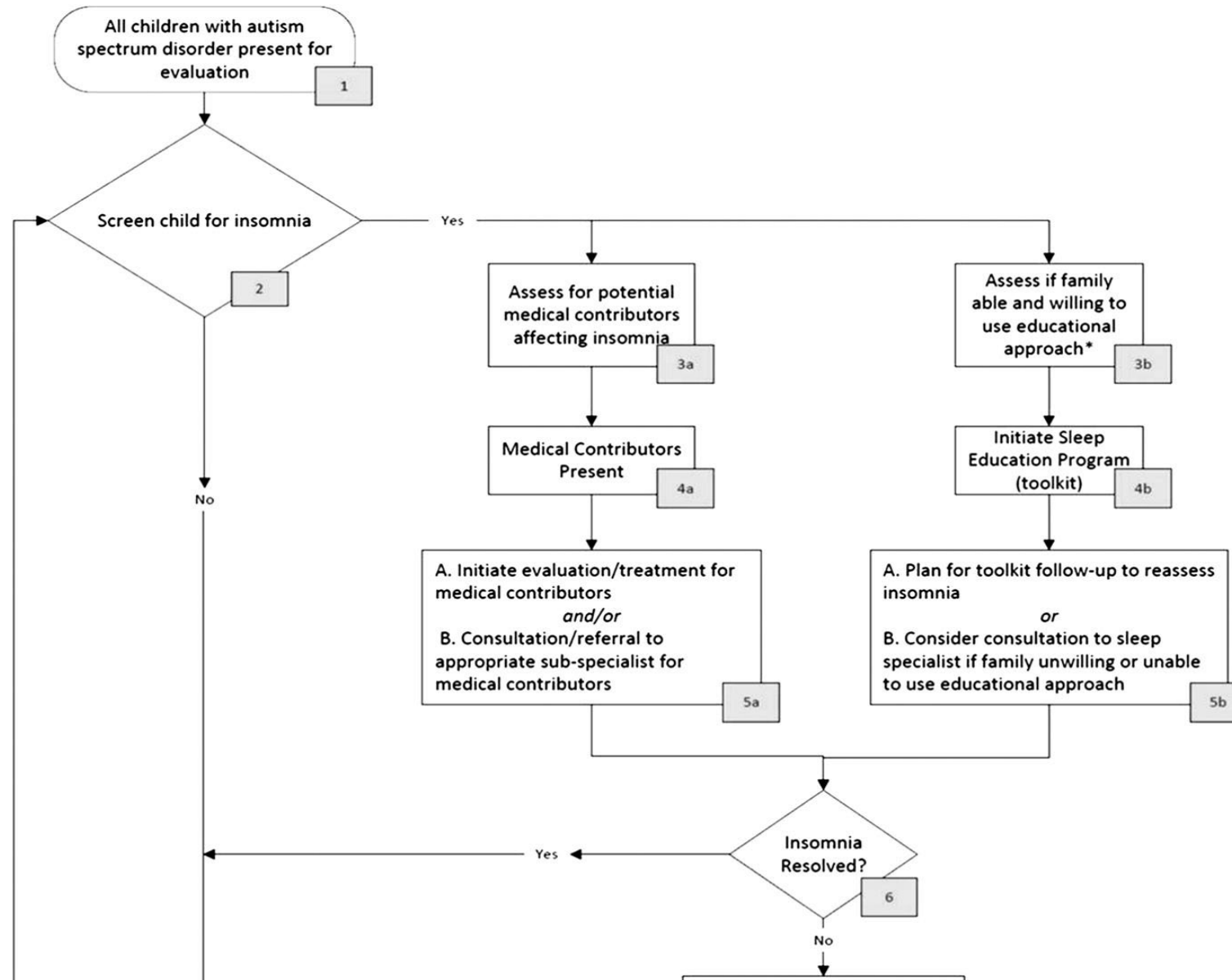
- Where to intervene?
 - Bedtime routine worksheet
 - Good Night, iPad
 - Parental patterns
 - Underlying medical issues
 - Decreased sleep need

Adjust

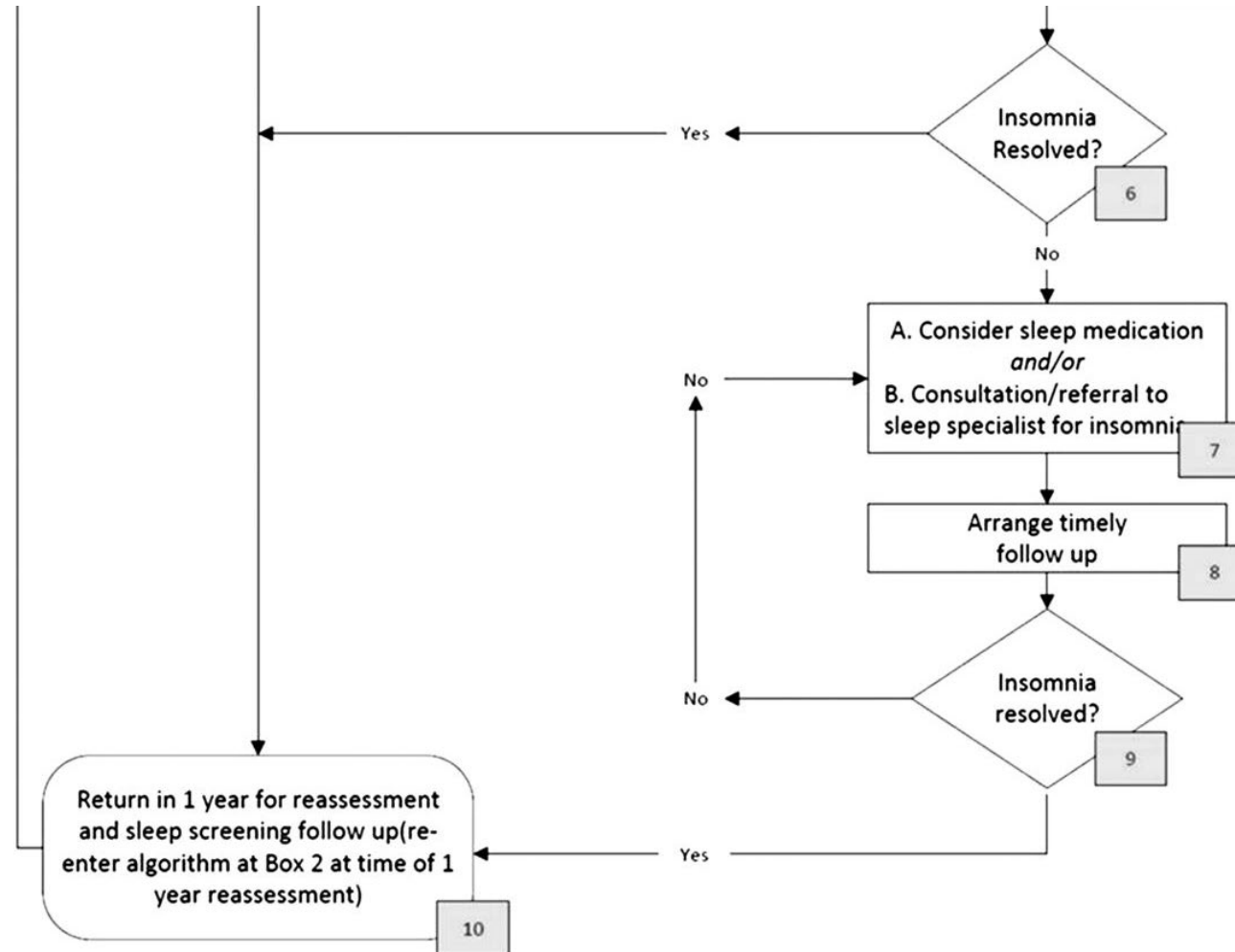
- Did the intervention work?
 - Gather data
 - Track improvement
 - Small tests of change
 - Be patient
 - Family Driven – doable



Insomnia Algorithm



Insomnia Algorithm



**If family reluctant, provider should discuss healthy sleep habits*

Where to Start?

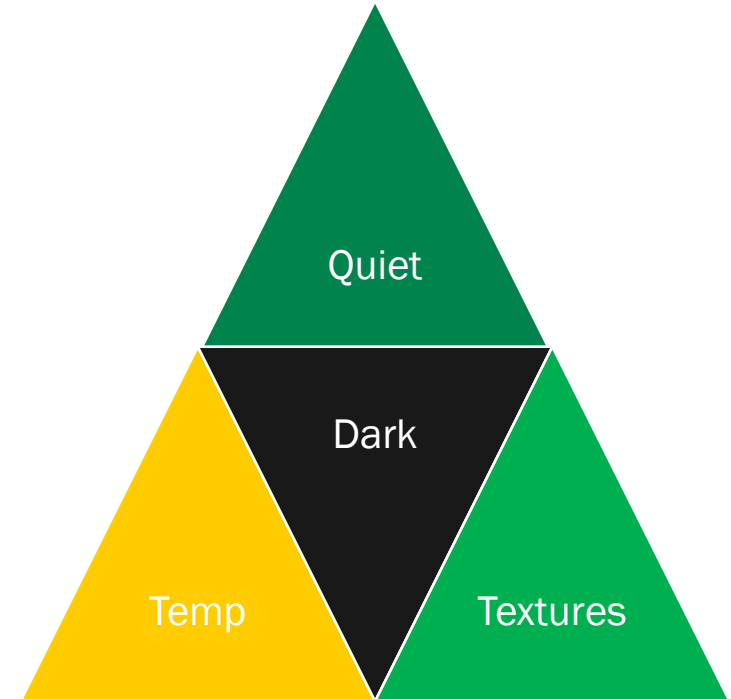
- Behavior Modification Strategies
 - Bedtime routine
 - Bedtime pass
 - Light timer
 - Calm peaceful, predictable environment
 - Social story
- Refer to sleep specialist
- Trial melatonin
- Refer to ENT for snoring evaluation



Where to Start?

- Provide a Comfortable Sleep Setting
- Establish a Regular Bedtime Routine
- Sunlight matters!
- Encourage Behaviors that Promote Sleep
 - Exercise
 - Mealtimes

TIPS 'n' TRICKS



It's all about ROUTINE!

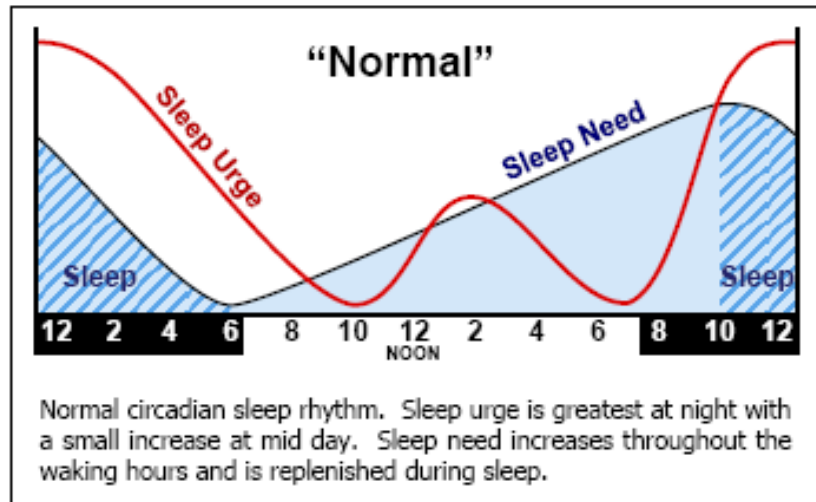
- Routine should be done in the **same order** each night
- Do “stimulating” or “non-preferred” parts of the routine first – see bedtime routine worksheet
- Use visual schedules
- Choose a consistent bedtime – 7 days a week!

Sample Images for Visual Schedule



Motivation and Timing

- Make sure the “time is right”
- Sleep Urge/Pressure
 - If a child takes more than 1 hour to fall asleep, it may be too early
 - If a child has a “second wind”, wait to put them to bed



- Motivation/Predictability

Sample Images for Bedtime Pass



Treatment

- Pharmacological Interventions
 - If an educational/behavioral approach is not appropriate
 - Caregivers are **not willing** to implement the intervention
 - Caregivers are **not able** to implement the intervention
 - Intensity of symptoms have reached a crisis point
- Evidence for pharmacological treatments is limited
- No medications FDA approved to treat pediatric insomnia
- Commonly used medications include melatonin and clonidine

Treatment

- Follow-up to monitoring progress is essential
 - Should occur 2 - 4 weeks after treatment begins
 - In person or by telephone
 - Follow-up should include
 - Making appropriate adjustments to the intervention, if needed
 - Assess the support/ability for the family to implement the intervention
 - Provision of appropriate referrals to a specialist, if needed

Resources

Strategies to Improve Sleep in Children with ASD

Strategies to Improve Sleep in Children with Autism Spectrum Disorders



A Parent's Guide



These materials are the product of on-going activities of the Autism Speaks Autism Treatment Network, a funded program of Autism Speaks. It is supported by cooperative agreement UA3 MC 11054 through the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Research Program to the Massachusetts General Hospital.

Sleep Quick Tips

Quick Tips Improving Sleep for Children with Autism



Using a Visual Schedule to Teach Bedtime Routines

A visual schedule is a set of pictures that shows what happens during the day. It can also be used to show what will happen during an activity. A visual schedule can help break down a task that has many steps. This helps someone learn and follow each step. Visual schedules show children when activities will happen during the day. This helps some children feel less anxious and be more flexible. Visual schedules can be used for many activities, not just for sleep. Some families may want to try a visual schedule during the day. Other families may want to start to use a visual schedule at bedtime. Families should work with their healthcare provider to pick what will work best for them. For a tool kit about visual aids, please go www.autismspeaks.org/atn.

- **Create a visual bedtime schedule** that your child will understand. Some children understand checklists; others need pictures, objects, or photographs.
- **Limit the number of activities** included within the routine. The routine should generally take about 30 minutes or less for your child to complete. Examples are provided below.
- **Place stimulating and/or difficult activities early** in the evening before the bedtime routine begins. Examples include videos (while enjoyable, they stimulate children), computer/video games, etc.
- **Place relaxing and enjoyable activities at the end** of the routine, closer to bedtime. Examples include reading a book, listening to quiet music, etc. Keep in mind, some activities are relaxing for some people and not for others.
- **Place the schedule in the area where the routine is performed** and at a height that will enable your child to reach each item.
- **Choose one cue** to let your child know it is time to check his/her schedule and use this cue consistently. Example of cues include: "time for bed...what's next?"
- Initially, your child may need to be prompted to use the schedule. **Stand behind your child and physically guide him/her to the schedule. Limit verbal instructions.** Use the visual schedule to communicate the sequence of activities.
- **Your child should manipulate the schedule.** Guide your child's hand to the schedule, so that your child, not the adult, checks items off the checklist or moves pictures on the schedule.
- **Use the same icon consistently to represent the same activity.** For example, only use one bath icon to represent "bath time," only one bed icon to represent "going to bed," etc.
- **Reward your child for following his/her schedule appropriately.** Rewards can be provided while following the schedule ("Thank you for using your schedule," paired with back rubs, small snack, etc) and when arriving at the correct location ("You are doing a great job using your schedule," paired with tickles, preferred toy/snack, etc).
- **If the routine must change** for a night or so, that is okay. Use the visual schedule to show your child which activities will happen that evening and in what order. Try to make the visual an accurate depiction of what will happen.

Sample Bedtime Checklist

- Put on pajamas
- Use the bathroom
- Wash hands
- Brush teeth
- Get a drink
- Read a book
- Get in bed
- Go to sleep

Sample Visual Bedtime Routine



Sleep Strategies for Teens with Autism Spectrum Disorder



A Guide for Parents



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Sleep Strategies for Teens with ASD

Session Resources

- [A Practice Pathway for the Treatment of Night Wakings in Children with Autism Spectrum Disorder](#) (Journal article)
- [Solving Sleep Problems in Children with Autism Spectrum Disorder: A Guide for Frazzled Families](#) by Terry Katz, PhD and Beth Ann Malow, MD, MS (Book)
- [ASD Resources for PCPs to Provide Families](#)
- [Recommend weighted blankets with caution](#)