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Sleep patterns of children: developmental disorders vs. typical development

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Background: Sleep is crucial for brain maturation; thus, its disruption can worsen existing problems in children with neurodevelopmental disorders (NDD), increasing burden for their families. In this population, sleep disorders are common and often chronic. This study aimed to compare the sleep characteristics of children with typical and atypical development.

Methods: A cross-sectional study using an anonymous questionnaire was conducted in 2025. The survey was distributed online and filled out by parents of children treated in a Child Development Center of one healthcare facility. It included socio-demographic questions and an abbreviated version of Children's Sleep Habits Questionnaire (CSHQ), translated and used with author permission. Total and subscale scores and reported problematic sleep habits were compared among children with different developmental profiles.

Results: 378 parents of typically developing children ($n=314$) or those with NDD ($n=62$) were included, mean child age was 5.4 ± 1.34 years. Most common NDD were language development (38.7%) and autism spectrum disorders (35.5%). Children with all kinds of NDD had significantly higher CSHQ scores (median [IQR]: 48 [44.2-53] vs. 45 [41-49], $p=0.003$), indicating more sleep problems, especially in Sleep Onset Delay (4 [3-5] vs. 3 [3-4.75], $p=0.010$), Night Wakings (2 [1-2] vs. 1 [1-2], $p=0.005$) and Sleep Duration subscales (3 [3-5] vs. 3 [3-4], $p<0.001$). Parents of children with NDD more often identified disturbed sleep regime and duration as problems (9.7% vs. 1.6%; 12.9% vs. 2.2%, $p<0.001$). Bedtime resistance strongly correlated with poor CSHQ results in both groups of children ($p<0.001$, $r=0.712$, $r=0.632$).

Conclusions: Children with NDD had more sleep problems, particularly pronounced in sleep initiation, duration and maintenance. Inconsistent or insufficient sleep posed a greater family burden for parents of atypically developing children. Poor sleep quality was impacted by bedtime resistance in both groups.

Key messages:

- Atypically developing children demonstrate a higher level of sleep problems compared to typically developing peers.
- Early intervention and mental health services should address these problems cooperating with the families and including necessary interventions into the individual early intervention plan.