

The Use of Clonidine for sleep problems in children with neurodevelopmental disorders: a case series

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Sleep problems are very common in children who have neurodevelopmental disabilities. They are a source of considerable stress in the general population (Richman 1981). There is a strong association between night-time problems and daytime behavioral difficulties (Clements et al. 1986) as well as maternal stress and depression, and family disharmony (Quine 1992).

In children with developmental disorders the prevalence of sleep problems is higher and symptoms are more problematic in terms of persistence and severity (Wiggs 2001). Additionally these difficulties place an added burden on parents already coping in exceptional circumstances. Various behavioural techniques have been shown to be successful (Lancioni et al. 1999). However, they are ineffective or insufficient for a large proportion of individuals. Pharmacological management has traditionally relied on sedatives, tranquilisers, and more recently melatonin (Jan et al. 1994). We report on the use of clonidine for the treatment of severe sleep problems associated with behavioural difficulties in five children (four boys, one girl) with neurodevelopmental disorders (mild to severe intellectual disabilities associated with attention-deficit-hyperactivity disorder [ADHD] or autism or hydrocephalus).

The use of clonidine as an effective treatment for children with ADHD is well established (Connor 1999). Clonidine has been used for sleep disturbances associated with ADHD (Prince et al. 1996), in the treatment of aggressive children (Kemph 1993) and children with autistic spectrum disorders associated with impulsivity and overactivity (Jaselskis 1992). To our knowledge this is the first report of the beneficial and side-effect free use of clonidine for severe sleep problems in children and young people who have neurodevelopmental disorders.