

# sleep

## Disorder

disguised as a  
"Behavior Problem"



— YOUR —  
MODERN FAMILY

“Central sleep apnea (CSA) is a pause in breathing during sleep, usually without snoring or gasping. Everyone experiences central apneas occasionally. However, if it occurs too frequently or for long periods of time, it can cause a decrease in the oxygen levels in the body and disrupt sleep.” ~Children’s Colorado.org

## What are the signs and symptoms of CSA?

- Observed episodes of pauses in breathing or abnormal breathing patterns during sleep
- Abrupt awakenings followed by shortness of breath
- Frequent awakenings in general
- Headaches in the morning
- Difficulty focusing and concentrating
- Daytime sleepiness (if sleep is disturbed)

This was not SLEEP apnea as we knew it. It was **not** a blockage. It was not the same as obstructive sleep apnea. This was CENTRAL sleep apnea, caused by his brain telling him that he was drowning, pretty much, and making him get out of his REM sleep to ‘wake up and take a breath’. This type of sleep apnea is often related to congestive heart failure and puts our son at a higher risk for breathing problems related to a heart condition.

So they sent him for more tests to rule out any of these further complications.

He did not have a heart condition or restless leg syndrome rls. Now we needed to fix his breathing patterns to help him so he sleeps through the night ... every night.

**What the doctor told us next explained the grumpiness, moodiness, temper**

**tantrums, etc... in 11 little words:**

**“He is waking up 8 times every hour, all night long.”**

Often times, one of these wake-ups would lead to a 1-2 hour time of being awake. This is why the symptoms of sleep apnea often resemble the symptoms of ADHD. They are tired, grumpy, moody and anxious due to lack of sleep.

A child waking at night is not rested enough to think or act the way that a rested child would think or act. This is why they show that ADHD misdiagnosed is happening more & more.

**Our poor sweet baby boy was barely sleeping.**

Can you imagine how cranky that would make you? He was chronically tired. By the time bedtime rolled around, he was exhausted and fell asleep within minutes.



## **So... we looked into solutions for his sleep disorder.**

He had many tests done because often times central sleep apnea is linked to a heart problem. Everything else came back normal and now we just had to help him. We started him on a CPAP machine to help him. It took months to get it right, but once we did, he was back. Our sweet, happy, selfless, caring E was back.

That was three years ago. To say that his life changed is an understatement. He went from being the one that was unpredictable to being a child that you could rely on. He went from one that you hated to disappoint, because you knew how we would react, to being a child who could take things with a grain of salt.

Don't get me wrong... he still had to unlearn the behaviors that he was used to (five years of "losing it" about things can change the way you handle things), but now he had the sleep that he needed and he could react in a calm way.

## **I wasn't alone...**

Then, last week, I was online and read a Facebook post written by another mother... and that post went viral. It was like I had written it myself... Her name was [Melody Yazdani](#) and she was another mother of four.

Melody says in her post ***"Please share this"*** because her desire to help other mothers is so great. I reached out to Melody to let her know that I was writing this post and I couldn't agree more. If only others knew that sleep disorders just don't look like we think they do... hopefully this post will get the message out there.



Melody Yazdani

October 24, 2018 · 🌐



👍👹❤️ 52K

59K Comments 375K Shares

“Parents, prepare yourself for some all caps yelling because this is going to change some lives...

All parents. If you have a child, I'm going to tell you something you need to know that you have probably never heard. And please share this. There is a huge red flag in the picture I am sharing with this story. Do you see it?

CHILDREN SHOULD NOT BREATHE THROUGH THEIR MOUTHS. Not while awake, not while asleep. Never.

# Symptoms that your child may have a sleep disorder:

If your child...

- falls asleep immediately after their head hits the pillow,
- snores,
- grinds their teeth,
- wakes up in the night,
- has night time accidents or daytime accidents,
- has impulse control issues,
- is hard to understand when speaking,
- has under eye circles
- as crooked teeth or a misaligned bite,
- wakes up insanely early,
- is irritable during the day,
- has a bad appetite,

Let me back it up to last year: My son, Kian, now age 8, determined, intelligent, feisty, and extremely active. He started school, no problems in Kindergarten. First grade rolled around, and we started getting behavior reports. “Kian pushed so and so” “Kian is having a hard time controlling his body”

Parent-teacher conferences, new reward system in place, and it seems to improve. But at home, it did anything but. When Kian gets angry, he gets ANGRY. He gets fixated on little things (there is a hair in the shower, it’s gross! I can’t shower in there! \*meltdown commences\*), his fuse gets shorter and shorter, and he’s a picky eater who barely eats.

Second grade rolls around, and oh boy. While other kids are outgrowing their

tantrums, Kian's intensify and turn into daily spectacles, triggered by the smallest thing. The behavior reports from school start rolling in. "Kian is pushing" "Kian can't control his impulses" "Kian is having a hard time staying in his seat" and it goes on and on. Almost daily. And I'm mortified. Every morning it's tantrum after tantrum before we even get out of bed.

**Hitting, and throwing things, and the screaming. All the screaming. Starting at 5AM every morning.**

We were at a loss – how did he become this way, what could we have done differently?

Kian starts seeing a therapist, recommended by his pediatrician. The therapist starts working with him and eventually recommends ADHD testing. Meanwhile, in the background, Kian has a persistent cough that just won't go away, so we are also seeing a pulmonologist, and, against the advice of the pulmonologist, an allergist.

This will become relevant in a moment. Each doctor is recommending more and more medications – 2 inhalers for the cough, an antibiotic (4 different rounds) for the postnasal drip, a steroid, and it goes on and on. The therapist is dancing around ADHD, pushing us in that direction.

At a cleaning, Kian's dentist makes an offhand comment about his teeth – they were ground almost halfway down, he's grinding his teeth at night.

And then lightning struck, right at the perfect time. I stumbled upon an article that changed our life. The article, I've included at the bottom of the post, was about the connection between ADHD, sleep-disordered breathing, and mouth breathing.

Every word in this article sounded like Kian.

This led me down a rabbit hole of research (the majority of which was done right in our back yard at the National Institute of Health) where I learned the following: Mouth breathing is NOT NORMAL and has long term consequences for health.

## **Sleep deprivation in children and ADHD exhibit the same symptoms.**

### **The EXACT SAME SYMPTOMS.**

⇒ Studies have been done (thanks, NIH) where they took medicated ADHD kids, fixed the sleep disordered breathing, and within 6 months 70% of the children had seen a resolution in symptoms and were no longer medicated.

As in, **their ‘ADHD’ was cured.** Because it wasn't ADHD.

In 70% of children. Let that sink in.

## **This means that 70% of those children had been misdiagnosed with ADHD when they actually had a treatable sleep disorder.**

Stimulants – Of course, they work, until they don't. If you are sleep deprived, taking a stimulant will, of course, help you focus and feel 'normal.' But the brain is never fully resting – and hence the side effects

- nervousness,
- agitation,

- anxiety,
- sleep problems (insomnia),
- stomach pain,
- loss of appetite,
- weight loss,
- nausea,
- suicidal ideation'

Imagine yourself with, let's say, three days of sleep deprivation. How? Multiply that times 100.

Now throw a stimulant in the mix.

How do you think you'll feel once you start coming down from that?

The list goes on and on (I have copied some of the research links below).

## **Our story has a happy ending.**

After a visit to an ENT and a sleep study, he was diagnosed with sleep apnea and sinusitis. He got exactly 0 minutes of REM sleep during the first study, and oxygen saturation in the low 80% and his sinuses were 90% blocked. We had no idea that Kian had a headache daily, but it was just his normal so he never thought to tell us. Kian had his tonsils and adenoids removed and the change was immediate.

He could breathe through his nose as he came out of surgery, where he couldn't when they wheeled him in.

## **We have seen a complete 180 in behavior.**

No more angry tantrums, no more fixation on little OCD things, it's been an

enormous change. And we haven't even finished the second step – fixing his jaw and tongue issues that developed during the course of undiagnosed sleep apnea.

### **Our followup sleep study?**

360 minutes of REM sleep, and oxygen saturation above the minimum threshold. No behavior reports in school. His appetite has exploded, he's no longer a picky eater, and he had a huge growth spurt 2 weeks after the surgery.

He still has mild sleep apnea, but the frequency in the night was cut in half, and the duration of each episode was cut in half. If we see this much of a change now, I can only imagine how much it will improve once we cross the finish line.

### **Here's why I am sharing:**

**No one, in my 12 years of parenting, ever told me any of this.**

All the signs were there, right in front of our eyes, and I had no clue.

Kian's pediatrician, who we loved and trusted, never said a word. The therapist had no clue, the pulmonologist, the allergist, even the ENT and sleep doctor didn't believe me when I insisted he is seen for this invisible health issue. Not during any of our regular appointments, or during any of our sick child appointments.

And not until we have tangible proof with sleep study results and sinus imaging did anyone believe. I had to find this, diagnose this, and push for treatment myself.

**And thank God I did.**

If any of this is raising red flags in your mind, if this sounds like your child, if your child has been diagnosed with ADHD, please see an ENT and get a sleep study. It

may just change your life.

[Please share this](#), you may help someone – I wish I had learned this information years ago!” – [Melody](#), [Facebook Post](#)

***(She also writes that while she is grateful for the reach of her post, she can not help to diagnose any children, but that she made an appointment directly, without a referral. We did the same.)*** ❤️❤️❤️

## **How common is ADHD misdiagnosed?**

**Often.**

According to the Centers for Disease Control and Prevention, **ADHD is the most**

**commonly diagnosed behavioral disorder for kids** in the United States, with at least 4.5 million diagnoses among children under age 18.

## **Can ADHD be mistaken for anxiety?**

Yes. According to Child Mind Institute, ADDitudeMag, “Common symptoms occur for a variety of reasons and can reflect several different diagnoses. That’s why a good mental health professional will give your child a thorough evaluation based on a broad range of information before coming up with a diagnosis. It’s crucial to understand what’s really behind a given behavior because, just as in medicine, the diagnosis your child receives can drastically change the appropriate treatment.

ADHD medications, for example, won’t work if a child’s inattention or disruptive behavior is caused by anxiety, not ADHD.

According to Additude Mag, “Anxiety Disorders (AD) occur much more frequently in people with ADHD than they do in the general population. ... ADHD and anxiety disorder symptoms overlap. Both cause restlessness. An anxious child can be highly distracted because he is thinking about his anxiety or his obsessions.”

## **Can ADHD be misdiagnosed as Dyslexia?**

Unfortunately, Yes. “Sometimes people confuse ADHD with dyslexia, but they are different disabilities. Learning Disabilities is a language-based learning disability; ADHD is a deficiency of attention. When you treat ADHD, the symptoms of dyslexia may improve; the new-found capability for paying attention helps in reading.” – Additude Mag

Dr. Russell Barkley, author of *Taking Charge of ADHD: The Complete Authoritative Guide for Parents*, Suggests that children with ADHD are more likely to have a

learning disability, like dyslexia. According to The Very Well Mind, they both show the same symptoms of poor penmanship, trouble with fluency and distraction.

## **So what can you do?**

According to Sleep Review Magazine: “Dentist Michael Fulbright, DDS, sleep apnea in children is a big problem, particularly when it goes undiagnosed or is misdiagnosed entirely. “These days, many children are being diagnosed with ADHD (attention deficit hyperactivity disorder). Some of them are acting out in school and getting in trouble. Well-meaning doctors may misdiagnose some of these children and prescribe Ritalin for ADHD, when really the cause of their behavioral problems may be sleep apnea,” he says in a release.

I highly suggest being 100% sure that your child has ADHD before starting any medication. Have the doctors do a sleep study to be on the safe side. I wish we had done ours years ago.

***Take care & good luck! You are your child’s voice... their advocate & their support.***

***We only have a few years to really be present (and we can make the true difference in their lives when we spend these years wisely.)***

***I want to invite you to sign up for my [FREE e-mail series called One on One time.](#) It is completely free & I will send you this calendar to get you started.***

