ADHD and sleep problems frequently overlap and their relationship is complex and bidirectional. The association between ADHD and sleep problems is considered by paediatricians as part of the global approach to the management of ADHD.

**Objectives** To find out the frequency of sleep problems among ADHD children from 6–14 year old in Andalusia, Spain.


**Results**
- ADHD-IA=62, ADHD-HI=31, ADHD-C=64; control=197
- Comorbidity ADHD-sleep-problems: Sleep-problems in the first year of life: 36%-ADHD, 25%-control. (p<0.000)
- Daytime sleepiness:10%-ADHD, 1.5%-control.
- Prolonged sleep latency:14%-ADHD, 2%-control.(p<0.000)
- Night- awakenings:14%-ADHD, 2%-control.(p<0.000)
- Sleepwalking and sleep terrors:14%-ADHD, 2%-control.(p<0.000)
- Periodic limb movements in sleep: 51%-ADHD, 8%-control.(p<0.000)
- Nightmares: 25%-ADHD, 5%-control.(p<0.000)
- Enuresis:18%-ADHD, 4.6%-control.(p<0.000)
- Regular time for bed: only 36%-ADHD.
- Bedsharing:18%-ADHD ≥ 3 sleep problems: 56%-ADHD. 12%- control. The association between ADHD subtypes and sleep problems showed significant differences.

**Conclusions** The children with ADHD had more sleep-problems that control children.

**Material-method** The research was conducted on 999 patient 2–6 years presenting patient out-patient clinic. Parents were given a survey containing questions about the sociodemographic and sleep.

**Results** 80.9% of children were entering to bed in the hours 22.00 to 22.00 and 67.0% of children were entering to bed in the hours 22.00 to 00.00. Sleeping and waking hours of children were found to be compatible with their parents (p=0.001). 50.2% of children with bedtime from 20.00 to 22.00 were fall asleep immediately and 22.6% of children with bedtime from 22.00 to 00.00 were fall asleep immediately (p=0.001).

We found that 62.9% of children snoring, 72.5% of children with mouth breathing, 38.7% of the children stopped breathing, 79.3% of the children were restless sleep, 80.2% of children saw a nightmare, 43.1% of the children gnashed teeth during the sleep. We found that snoring, mouth breathing, restless sleep and frequent waking findings were more frequent in children with symptoms of attention deficit hyperactivity than in the other group.

**Conclusions** In the preschool-aged children, sleep disorders were common in. Sleep disorders were more frequent in children with hyperactivity symptoms. Primary care assessment of preschool-aged children should be questioned their sleep problems.

**Background and Aims** To report thirteen cases of children with cerebral palsies (CP) discovered dead during sleep (DDDS) and to synthesize the research literature on CP survival.

**Method** We utilized case series to describe the common features among patients DDDS between 1993 and 2011. Using our medical records, we extracted data on demographics, treatment, and comorbidities. In addition using the appropriate search terms, we searched the Medline and other electronic data bases for articles published between 1966 and 2011. Further, we synthesized the literature and provided evidence on clinical conditions that could be associated with CP mortality in relation to DDDS, obstructive sleep apnea syndrome (OSAS) and sleep related breathing disorders (SRBD) management.

**Results** Between 1993 and 2011 there were 177 reported deaths, of which 13 occurred as a result of being DDDS at home. All the deceased patients had Gastrointestinal feeding tube, seizure, respiratory disorders, and were non-ambulatory. A greater proportion had scoliosis and hip dislocation surgeries. DDDS in our sample may be associated with these conditions; and OSAS/SRBD as evidenced in literature.

**Conclusion** Pulmonary problems and disorders were the most common co-morbidity, due probably to oxygen desaturation (<70%), prolonged sleep apnea such OSAS and SRBD. Since there were no data on Polysomnography (PSG) and autopsy, it was difficult to account for specific sleep disorders that might have contributed to DDDS. We recommend a routine PSG and treatment of OSAS and SRBD, given their high prevalence among CP patients, especially those with disturbed nocturnal sleep and noisy breathing.