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PEDIATRIC SLEEP MEDICINE TRACK

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PEDIATRIC TRACK OVERVIEW

TYPE	DAY	TITLE	HOURS
 COURSE	Saturday	Pediatric Sleep	8:00am - 5:00pm
DISCUSSION PANEL	Monday	Defining and identifying “restless sleep disorder” among sleep disorders of childhood	10:45am - 12:15pm
KEYNOTE	Monday	Adolescent sleep: Timing is everything...or is it?	2:00pm - 2:45pm
DISCUSSION PANEL	Monday	Alternative diagnostic approaches to childhood obstructive sleep apnea	3:00pm - 4:30pm
DISCUSSION PANEL	Tuesday	Melatonin use in children: The promise and the peril	10:45am - 12:15pm
SYMPOSIUM	Tuesday	Progression of childhood sleep-disordered breathing - natural and after intervention	10:45am - 12:15pm
SYMPOSIUM	Tuesday	New perspectives in the management of pediatric narcolepsy	3:00pm - 4:30pm
SYMPOSIUM	Wednesday	Electronic media and sleep: Where are we and where are we headed?	9:00am - 10:30am
SYMPOSIUM	Wednesday	Sleep and mental health in adolescents	12:30pm - 2:00pm
SYMPOSIUM	Wednesday	Sleep health disparities among children across three continents	3:00pm - 4:30pm
SYMPOSIUM	Wednesday	Global perspectives on adolescent sleep and health: Predictors, treatments, and policies	4:30pm - 6:00pm



■ C01 Pediatric sleep

Saturday, September 21, 2019 | Room 118 | Chairs Reut Gruber (Canada); Oliviero Bruni (Italy)

Summary

Growing recognition of the prevalence and impact of sleep disorders in children highlights the need for improved knowledge regarding diagnosis and treatment. The overall objective of this course is to provide the sleep medicine provider with comprehensive and updated knowledge and tools to understand, diagnose and treat pediatric sleep disorders. Polysomnographic issues will be discussed within each presentation as appropriate.

8:00am – 8:10am

Introduction

Reut Gruber (Canada); Oliviero Bruni (Italy)

8:10am – 8:50am

Insomnia in infants and children

Judith Owens (United States)

8:50am – 9:30am

Insomnia & DSPS in adolescence

Reut Gruber (Canada); Daniel Lewin (United States)

9:30am – 9:50am

Coffee break

9:50am – 10:30am

SDB and OSA Part 1 - Clinical presentation, assessment, epidemiology, evaluation

Eliot Katz (United States)

10:30am – 11:10am

SDB and OSA Part 2 - Treatment-surgical interventions, CPAP, oral appliances, positional therapy, weight loss

Sherri Lynn Katz (Canada)

11:10am – 11:50am

Parasomnias

Shelly Weiss (Canada)

11:50am – 12:30pm

Pediatric Narcolepsy and other hypersomnia

Michel Lecendreux (France)

12:30pm – 1:30pm

Lunch break

1:30pm – 2:10pm

Movement disorders - RLS PLMD Rhythmic movement disorder

Oliviero Bruni (Italy)

2:10pm – 2:30pm

Break

2:30pm – 3:10pm

Sleep and mood, anxiety, PTSD, ADHD and other psychiatric disorders

Anna Ivanenko (United States)

3:10pm – 4:00pm

Panel discussion, Q and A

Reut Gruber (Canada); Oliviero Bruni (Italy); Judith Owens (United States); Daniel Lewin (United States); Eliot Katz (United States); Sherri Lynn Katz (Canada); Shelly Weiss (Canada); Michel Lecendreux (France); Anna Ivanenko (United States)

PEDIATRIC DISCUSSION PANEL | MONDAY, SEPTEMBER 23, 2019

■ Defining and identifying “restless sleep disorder” among sleep disorders of childhood

10:45am - 12:15pm | Room 118

Chair

Lourdes DelRosso (Peru)

Summary

Pediatric sleep disorders have a significant impact in the life of children and their families. Lack of sleep can adversely affect a child’s development, health and performance. In spite of clear diagnostic criteria for sleep disorders, the diagnosis of these conditions in children can be challenging as symptoms can overlap, and other conditions can present with sleep disruption and daytime symptoms. A group of children with “restless sleep” have been identified. These children do not fit criteria of any other current diagnostic category. The parents have concerns that night time restlessness is associated with excessive sleepiness, school cognitive problems or behavioral problems (irritability or hyperactivity).

10:45am – 10:47am

Introduction

10:47am – 11:07am

Clinical and video polysomnographic findings in children with restless sleep

Lourdes DelRosso (Peru)

11:07am – 11:27am

Diagnostic criteria for pediatric RLS, PLMD and proposed criteria for RSD

Daniel Picchiatti (United States)

11:27am – 11:47am

Hypermotor insomnia and other insomnia types in childhood

Oliviero Bruni (Italy)

11:47am – 12:07pm

Effects of iron deficiency on brain development

Patricio Peirano (Chile)

12:07pm – 12:15pm

Conclusion



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PEDIATRIC SLEEP MEDICINE TRACK

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KEYNOTE SPEAKER



■ K02: Adolescent sleep: Timing is everything...or is it?

10:45am - 12:15pm | Ballroom A

Keynote

Mary A. Carskadon, PhD (United States)

Summary

A major focus of Dr. Carskadon's scientific activities is research examining interrelations between the circadian timing system and sleep/wake patterns of children, adolescents, and young adults. Her findings have raised public health issues regarding the consequences of insufficient sleep for adolescents as well as concerns about early starting times of schools. Her work has affected education policy, prompting the AAP, CDC, and others to promote later school timing for adolescents and many school districts to delay school start times for high school students.

Carskadon's current research includes an evaluation of how sleep and circadian timing influence smell, taste, food choices, and food consumption in overweight and assessing effects of serial nights of alcohol on sleep and next-day function in adults. Proposed new projects seek to (1) assess the chronic and direct effects of caffeine on circadian and homeostatic sleep systems in early adolescents; (2) evaluate sleep health disparities in inner-city children with chronic asthma; (3) measure gene methylation and genotype with observational phenotyping and experimental sleep interventions in young adults.

2:00pm – 2:02pm

Introduction

2:02pm – 2:45pm

Adolescent sleep: Timing is everything...or is it?

PEDIATRIC DISCUSSION PANEL MONDAY, SEPTEMBER 23, 2019

■ Alternative diagnostic approaches to childhood obstructive sleep apnea

10:45am - 12:15pm | Room 118

Chair

Albert Martin Li (Hong Kong)

Summary

Childhood OSA is a common condition and prevalence rate is often quoted as 3 - 5%. This condition has important clinical implications as if it is left untreated, a variety of complications can result, namely cardiovascular, neurocognitive and metabolic disturbances. Therefore it is important to recognize the condition early and offer prompt treatment. The current gold standard in diagnosing childhood OSA is overnight polysomnography (PSG). Unfortunately, PSG is rather labour and cost intensive.

In addition, it is not available in all paediatric units and therefore waiting time for patients to undergo PSG is often very long. This has resulted in unnecessary delay as patients have to wait for months and even years before a diagnosis is confirmed and management instituted. Recent research has focused on alternative diagnostic methods in order to prioritise patients suspected with OSA for early intervention and in some studies, methods to replace PSG are also being investigated.

In this panel discussion, the speakers will provide pro/con information on topics that aim to provide an up-to-date review of alternative tools being investigated / used for the diagnosis of childhood OSA.

3:00pm – 3:02pm

Introduction

3:02pm – 3:22pm

Pitfalls of polysomnography for childhood OSA, why is it failing us?

Rosemary Horne (Australia)

3:22pm – 3:42pm

Can parent-reported sleep symptom questionnaire and or overnight oximetry replace PSG?

Daniel Goh (Singapore)



**PEDIATRIC DISCUSSION PANEL (continued)
MONDAY, SEPTEMBER 23, 2019**

3:42pm – 4:02pm

Combining imaging findings and symptoms in diagnosing OSA
Kate Chan (Hong Kong)

4:02pm – 4:22pm

Drug-induced sleep endoscopy is the way forward, where is the evidence?
An Boudewyns (Belgium)

4:22pm – 4:30pm

Conclusion

**PEDIATRIC DISCUSSION PANEL
TUESDAY, SEPTEMBER 24, 2019**

■ **Melatonin use in children: The promise and the peril**

10:45am - 12:15pm | Room 118

Chair

Judith Owens (United States)

Summary

While there is a robust literature supporting the efficacy of melatonin in short-term pediatric clinical trials in special needs populations, many questions remain. For example, recent evidence suggests that over-the-counter preparations of melatonin may vary significantly in terms of actual concentration, and may contain contaminants such as serotonin. There are concerns regarding long-term safety considerations in children, including the impact on the hypothalamic-gonadal axis and the immune system. The appropriate timing and dosage of melatonin for circadian rhythm disorders in adolescents have yet to be determined.

This symposium will address a number of fundamental concerns regarding melatonin use in children, including what is currently known regarding melatonin neurophysiology in the developing brain, the challenges of establishing clinical guidelines for melatonin use in the face of somewhat limited empirical evidence, indications for use of melatonin in a variety of pediatric populations, and future directions for research.

10:45am – 10:47am

Introduction

10:47am – 11:03am

Update on the neurophysiology of melatonin in children and adolescents

Jonathan Lipton (United States)

11:03am – 11:19am

Safety of short term and long term pharmacologic treatment with melatonin in children

Inge van Geijlswijk (The Netherlands)

**PEDIATRIC DISCUSSION PANEL (continued)
TUESDAY, SEPTEMBER 24, 2019**

11:19am – 11:35am

Melatonin in children with autism and neurodevelopmental disorders: The latest evidence
Paul Gringras (United Kingdom)

11:35am – 11:51am

Establishing clinical guidelines for melatonin use in children
Oliviero Bruni (Italy)

11:51am – 12:07pm

“Vitamin M”: Melatonin and insomnia in children
Judith Owens (United States)

12:07pm – 12:15pm

Conclusion

**PEDIATRIC SYMPOSIUM
TUESDAY, SEPTEMBER 24, 2019**

■ **Progression of childhood sleep-disordered breathing - natural and after intervention**

10:45am – 12:15pm | Room 121

Summary

Childhood sleep-disordered breathing (SDB) is a spectrum spanning from individuals with regular snoring yet normal sleep study to OSA. Latter belongs to the severe end of this spectrum and can lead to a variety of complications if it is unrecognized and left untreated. Childhood and adult OSA share some similarities in terms of pathophysiology, namely anatomically narrow upper airway, and/or increase in airway collapsibility, and/or alterations of neuromuscular tone. However, they are pretty distinct disease entities because of different underlying aetiologies. During childhood, the most common cause is adenotonsillar hypertrophy, while approaching adulthood, obesity becomes the more common predisposing factor. Understanding the natural history of SDB can help us predict disease course, perform risk stratification with individual characteristics and guide us in management. More importantly, longitudinal data will help answer the question of whether childhood OSA predisposes an individual to the development of adult OSA. Furthermore, information and progress related to post OSA intervention are essential when we counsel parents and patients regarding the most suitable treatment options and prognosis.

Chair

Albert Martin Li (Hong Kong)

10:45am – 10:47am

Introduction

10:47am – 11:03am

What happens to a child with primary snoring with time, is he morbidity free?

Chun Ting Au (Hong Kong)

11:03am – 11:19am

Longitudinal follow-up data from a Chinese cohort to examine predictors of SDB resolution

Kate Chan (Hong Kong)



PEDIATRIC SYMPOSIUM | TUESDAY, SEPTEMBER 24, 2019

11:19am – 11:35am

Findings from Penn State longitudinal cohort to evaluate predictors for incident SDB

Edward Bixler (United States)

11:35am – 11:51am

The cohort study of pediatric OSA following surgery treatment

Yu-Shu Huang (Taiwan)

11:51am – 12:07pm

Are OSA related complications reversible following intervention?

Rosemary Horne (Australia)

12:07pm – 12:15pm

Conclusion

■ **New perspectives in the management of pediatric narcolepsy**

3:00pm – 4:30pm | Room 219

Summary

Narcolepsy is a chronic and disabling disorder affecting sleep and wakefulness, characterized by excessive daytime sleepiness (EDS), sudden sleep episodes and attacks of muscle atonia mostly triggered by emotions (cataplexy). Narcolepsy is a lifelong disorder, however not progressive, due to the loss of hypocretin neurons, and which occurrence during childhood is frequent. The occurrence of the disorder during childhood and adolescence should be taken into consideration. Narcolepsy in children and adolescents is still under-diagnosed and is often mistaken in its onset for other diseases or even neglected.

Young patients affected by the disorder often show dramatic and abrupt impairment in their social skills and academic performances due to excessive daytime sleepiness, fatigue and lack of energy. The goal of the symposium is to underlie the clinical characteristics of pediatric narcolepsy and to highlight the therapeutic outcome for the disorder.

Chair

Michel Lecendreux (France)

3:00pm – 3:02pm

Introduction

3:02pm – 3:18pm

Clinical features in the narcoleptic child: How clinical evaluation may orientate towards therapeutic decisions

Giuseppi Plazzi (Italy)

3:18pm – 3:34pm

Pediatric narcolepsy, auto-immunity and potential therapeutic outcomes

Lucie Barateau (France)

3:34pm – 3:50pm

Pediatric narcolepsy and psychiatric features and treatment issues

Paul Gringras (United Kingdom)

3:50pm – 4:06pm

Management of the pediatric narcoleptic patient

Michel Lecendreux (France)

4:06pm – 4:22pm

Directions for the future, what can we expect regarding narcolepsy and other disorders of EDS based on current research?

Yves Dauvilliers (France)

4:22pm – 4:30pm

Conclusion

PEDIATRIC SYMPOSIUM

WEDNESDAY, SEPTEMBER 24, 2019

■ **Electronic media and sleep: Where are we and where are we headed?**

10:00am – 10:30am | Room 119

Chair

Jan Van den Bulck (United States)

Summary

Over the past 15 years, there has been growing concern about the association between electronic media use and sleep. Meta-analyses show that electronic media use before bedtime is related to shorter sleep duration, longer sleep onset latency, irregular sleep schedules, and daytime fatigue. Although the magnitude of the association may appear to be small at the individual level, it is important to compare findings across populations, to unravel the complex mechanisms underlying them, and to explore sensible prevention strategies. This panel will address these topical questions with data from varying countries, collected via diverse methodological approaches, and identify future steps to take in this research field.

9:00am – 09:02am

Introduction

9:02am – 9:18am

The association between electronic media use and sleep in adolescents, an update

Lauren Hale (United States)

9:18am – 9:34am

Social media and sleep: the adolescent perspective informing research and education

Holly Scott (United Kingdom)

9:34am – 9:50am

The lesser of many evils: Could a harm minimisation approach to reduce electronic media use improve young people's sleep?

Michael Gradisar (Australia)



9:50am – 10:06am

Limited media exposure is associated with poor sleep patterns in ultra-orthodox female adolescents: The forbidden fruit effect?

Tamar Shochat (Israel)

10:06am – 10:22am

Electronic media use and sleep among adults: Is it all the same?

Liese Exelmans (United States)

10:22am – 10:30am

Conclusion

■ **Sleep and mental health in adolescents**

12:30pm – 2:00pm | Room 119

Summary

Adolescence, covering the second decade between childhood and adulthood, is a period of fundamental development in brain and behavior, and also a time of increased vulnerability to mental health problems. Good quality and sufficient sleep is critical for optimal mental health; sleep complaints are a key symptom of psychiatric disorders, and shorter sleep is a known risk factor for depression, substance use disorders, and suicide. Given the substantial changes that occur in sleep across adolescence, with shorter sleep duration, later bedtimes, and altered sleep composition in older adolescents, it is important to focus on sleep-mental health associations during this period to ultimately determine whether sleep modifications are effective at lowering risk for mental health issues.

Chair

Fiona Baker (South Africa)

12:30pm – 12:32pm

Introduction

12:32pm – 12:52pm

Insufficient sleep and affective functioning in adolescents

Peter Franzen (United States)

12:52pm – 1:12pm

A longitudinal view on relationships between sleep, substance use, and mental health in adolescents

Aimee Goldstone (United States)

1:12pm – 1:32pm

The role of sleep in attention deficit hyperactivity disorder in adolescents

Reut Gruber (Canada); Anna Ivanenko (United States)

1:32pm – 1:52pm

Efficacy of sleep interventions in at-risk adolescents

Matthew Blake (Australia)

1:52pm – 2:00pm

Conclusion

■ **Sleep health disparities among children across three continents**

3:00pm – 4:30pm | Room 212

Summary

The social ecology model (SEM) is a theory-based framework for understanding the complex and interactive effects of personal, interpersonal, community and social factors on behavior that is commonly used to examine health disparities. Framed by the SEM, this symposium aims to present research on sleep health disparities among children in three countries.

Sleep is a foundation for a happy, stable, healthy and inclusive social life. The family plays a major role in shaping children's sleep behavior, and the family dynamic interacts with externalities, such as the demands of work, education, neighborhood and broader social participation. As such, the child, their family, and cultural context are each key factors in a strong social fabric. Sleep provides an opportunity to understand the impact of care environments on the child in a new way, and identifies new points for change to reinforce family function, health, and social harmony. This approach, drawing upon the SEM model, could have impacts in the broader community, especially for those families experiencing adversity.

Chair

Monica Roosa Ordway (United States)

3:00pm – 3:02pm

Introduction

3:02pm – 3:18pm

Individual determinants of sleep in children living with socioeconomic adversity

Monica Roosa Ordway (United States)

3:18PM – 3:34PM

The impact of parental adverse childhood experiences on children's sleep in China

Guanghai Wang (China)

3:34PM – 3:50PM

Sleep insecurity within Australian communities and co-design of community interventions to support children's sleep health

Karen Thorpe (Australia)

3:50PM – 4:06PM

Social impact on children's health: The role of childcare

Sally Staton (Australia)

4:06PM – 4:22PM

Cross cultural (Asian, Australian, American) differences of SEM model of sleep: Putting it all together

Simon Smith (Australia)

4:22PM – 4:30PM

Conclusion



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PEDIATRIC SYMPOSIUM | WEDNESDAY, SEPTEMBER 24, 2019

■ Global perspectives on adolescent sleep and health: Predictors, treatments and policies

4:30pm – 6:00pm | Room 119

Summary

Sleep disorders are common among adolescents around the world, including insomnia, delayed sleep-wake phase disorder, and insufficient sleep syndrome. In order to improve sleep among adolescents, it is essential to understand the biological and environmental factors that contribute to sleep disorders, and there is a critical need to develop and validate novel interventions to improve sleep duration and sleep quality in this age group. This symposium brings together international experts on adolescent sleep disorders, examining both contributing factors and interventions for adolescents from multiple perspectives.

Chair

Lisa J. Meltzer (United States)

4:30pm – 4:32pm

Introduction

4:32pm – 4:48pm

Pre-pubertal sleep patterns forecast adolescent sleep preferences and mental health functioning

Candice A. Alfano (United States)

4:48pm – 5:04pm

Internet- and group-CBT for adolescents with insomnia; the contribution of mindfulness techniques, and the effects on sleep and mental health

Ed J. de Bruin (The Netherlands)

5:04pm – 5:20pm

Modifying the impact of eveningness chronotype ('Night-Owls') in youth: A randomized controlled trial

Allison G. Harvey (United States)

5:20pm – 5:36pm

Bright light therapy and physical activity for adolescents with Delayed Sleep-Wake Phase Disorder: Effects on sleep and depression symptoms

Cele Richardson (Australia)

5:36pm – 5:52pm

Impact of delaying high school start times on adolescent sleep and health

Lisa J. Meltzer (United States)

5:52pm – 6:00pm

Conclusion



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