

Conclusion Sleep problems are common in epileptic children with close relation to partial epilepsy, number of anti epileptic and poor controlled epilepsy. This is important to deal with it in order to better control of sleep problems in such patient.

Keywords Child psychiatry; Sleep disorders; Epilepsy

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EW580

Correlates of sleep difficulties in young adults: A gender comparison

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Introduction Sleep disturbance is one of the most common health complaints among late adolescents and young adults. Women report more sleep-related complaints than men (Krishnan and Collop, 2006) and more anxiety or depressive symptoms (Voderholzer et al., 2003). Higher levels of repetitive negative thinking appear to be causally involved in the initiation/maintenance of emotional problems (Ehring and Watkins, 2008).

Aims To analyze the sleep difficulties differences by gender and its associations with stress, cognitive emotion regulation, perseverative thinking and negative affect.

Methods Five hundred and forty-nine students (80.1% females) from two Universities filled in the PSS-10 (Cohen et al., 1983; Amaral et al., 2014), CERQ (Garnefski et al., 2001; Castro et al., 2013), PTQ (Ehring et al., 2011; Chaves et al., 2013) and POMS-58 (McNair et al., 1971; Azevedo et al., 1991; Amaral et al., 2013). Three questions were used to access difficulties of initiating sleep (DIS), maintaining sleep (DMS) and early morning waking (EMA).

Results Females reported more sleep difficulties (excluding DIS), stress, perseverative thinking than males. Males reported higher levels in self-blame and blaming-others dimensions. In female sample we found significant correlations between all sleep difficulties and stress, perseverative thinking, emotional regulation (rumination, self-blame, catastrophizing) and negative affect. In male sample only the difficulties of initiating sleep are correlated with stress, perseverative thinking, self-blame and negative affect.

Conclusions There are no gender differences in frequency and most of correlates of DIS. DMS and EMA were higher in females and were related to perseverative thinking and emotional regulation mechanisms in this sample.

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EW582

Sleep disorders among adolescents in Nigeria: The development of an assessment instrument (Sleep Disorders in Nigeria Questionnaire [SDINQ])

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Introduction Nigerian adolescents report various sleep disorders metaphorically based on the local/native description of such disorders. Hence, it is sometimes difficult for clinicians without a good grasp of the nuance in their description to understand their presentation.

Aim To develop a culturally relevant (Nigerian) instrument for assessing sleep disorders.

Methods One thousand two hundred and twenty-seven Nigerian Secondary School adolescents (634 males and 593 females) between 12–19 years with mean age of 15.20 (SD=1.5) were administered a 44 item instrument developed following the DSM (V), American Association of Sleep Medicine's International Classification of Sleep Disorders (ICSD, 2005) criteria, and case reports of sleep disorders. The data was subjected to a Principal Component Analysis using Varimax rotation.

Result Ten factors instead of the original eleven factors suggested by the authors emerged in the analysis and on closer examination and in juxtaposition with cultural nuances, it was found the ten factors were in line with what is generally reported by adolescents. Sleep walking disorders and sleep related movement disorders loaded in one factor labelled sleep movement disorders, while items representing non restorative sleep experiences, sleep talking, sleep paralysis, sleep apnea, circadian rhythm sleep disorder, narcolepsy, insomnia, sleep terror disorder and nightmare disorder loaded on their individual factors. The SDINQ showed a Cronbach Alpha of .916 and a good correlation with subscales of the School Sleep Habits Survey (SSHS).

Conclusions The SDINQ has been found to be a valid and reliable instrument for assessing the presence of sleep disorders among adolescents in Nigeria.

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EW583

Prevalence of restless legs syndrome in professional cyclists

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Introduction Restless legs syndrome (RLS) is a sleep disorder affecting a significant part of general population. Clinically RLS is characterized by abnormal sensations of irresistible urge to move legs, becoming worse at night, and frequently causing insomnia. Consequences of RLS include daytime dysfunction, depressed mood, anxiety and decreased quality of life.

Objectives Determine prevalence of RLS in professional cyclists.

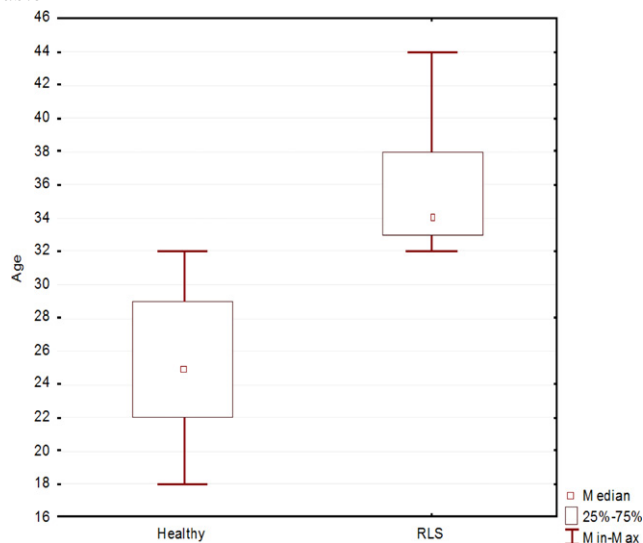
Aims The aim of this study was to examine the prevalence of RLS in professional cyclists. According to our knowledge this is the first research of RLS in professional cyclists.

Methods A total of 43 professional cyclists were asked to complete 4-item questionnaire based on IRLSSG Diagnostic Criteria for RLS. Data from questionnaire was compared to antropometric measurements, epidemiologic data, age of starting trainings and total years of professional performance.

Results The results indicated that prevalence of RLS in professional cyclists is 14% and is higher than expected in this age group. We found statistically significant relationship between RLS and age ($P < 0,001$) and years of experience as a professional cyclist ($P < 0,001$). Results revealed no significant differences between genders (Table 1).

Conclusions RLS seems to be a common problem in professional cyclists. It can affect sport performance. Future efforts to estimate the influence of RLS on professional sport performance should be considered.

Table 1



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EW584

Self-criticism and self-compassion role in the occurrence of insomnia on college students

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Introduction To our knowledge there are no research about the influence of self-criticism and self-compassion in the occurrence of insomnia.

Objectives To study the association between self-criticism, self-compassion and insomnia on university students; to explore differences in these associations on two moments of student's lives—examination and no examination period.

Aims We anticipate that the stress and pressure of the examination period have an impact on student's sleep and there are, also, differences by age and gender.

Method Self-Criticism and Self-Reassurance Scale, Self-Compassion Scale, Pre-Activation Sleep Scale, Insomnia Assessment Scale and Anxiety and Depression and Stress Scales were answered by 160 college students ($M = 26.45$, $SD = 7.98$; range = 19–54 years) during an examination period and by 108 college students during a no examination period ($M = 26.34$; $SD = 0.43$; range = 19–54 years).

Results In both periods (examination and no examination period) older students (30–54 years) tended to be more self-compassionate and tolerant, such as less self-critical and punitive. During the examination period, younger students (19–29 years) showed higher levels of self-criticism, cognitive, and somatic activation

before falling asleep. There was also a higher proportion of younger students in the insomniac and insomnia symptomatic groups. Moreover, significant correlations were found between cognitive and somatic activation and depression, anxiety, and stress in both moments.

Conclusions In the examination period, the youngest students are more critical and less compassionate, what might lead to greater cognitive and somatic activation before sleep and, consequently, to insomnia symptoms and insomnia itself.

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EW585

Self-compassion and insomnia at pregnancy

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Introduction Mindfulness based programs during pregnancy (some including self-compassion components) increase self-compassion, mindfulness and maternal self-efficacy, and reduce anxiety, stress and psychological distress in pregnant women. According to our knowledge, there are no studies about the association between self-compassion and sleep outcomes in pregnancy.

Objective To explore differences in self-compassion, between three sleep groups, in a sample of Portuguese pregnant women.

Methods Four hundred and nineteen pregnant women (mean age: 32.51 ± 4.759 ; weeks of gestation: 17.32 ± 4.803) completed the Self-Compassion Scale (SCS, Bento et al., 2015), presenting six dimensions (self-kindness, self-judgment, common humanity, isolation, mindfulness and over-identification) and the Insomnia Assessment Scale (Marques et al., 2015). Three sleep groups were formed: good sleepers (no insomnia symptoms; no associated daily impairment); insomnia symptoms groups (one/more insomnia symptoms; no associated daily impairment); insomniacs (one/more insomnia symptoms; daily associated impairment).

Results There were significant differences in the total SCS, self-judgment, isolation and over-identification scores, between sleep groups [respectively, $F(2,396) = 7,926$, $P \leq 0,001$; $F(2,409) = 19,155$, $P \leq 0,001$; $F(2,410) = 13,016$, $P \leq 0,001$; $F(2,412) = 11,258$, $P \leq 0,001$]. Self-judgment, isolation and over-identification scores of good sleepers and insomnia symptoms group were higher than of insomniacs. Total SCS score of good sleepers was higher than of insomniacs and the same score of symptoms of insomnia group was also higher than of insomniacs.

Conclusions Results seem to show the importance of developing self-compassion to improve sleep in pregnancy or reduce the impact of insomnia symptoms (common at pregnancy).

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EW586

Sleep disorders, depression and anxiety among medicine university students in Sfax

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