Opinion Article

## Media Representations of Parasomnia and Their Effects on Public Perception and Stigma

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## DESCRIPTION

Parasomnia remains one of the most fascinating yet misunderstood categories of sleep disorders. Despite being relatively common across different age groups, it does not receive the clinical and societal attention that it warrants. While insomnia and sleep apnea dominate the discourse on sleeprelated conditions, parasomnias are often downplayed, dismissed as childhood quirks or dramatized in media for their unusual manifestations. However, the reality is far more complex. Parasomnia refers to a range of disruptive sleep behaviors that can include sleepwalking, night terrors, confusional arousals, sleep paralysis, and REM sleep behavior disorder. These events can interfere with the restorative nature of sleep, pose physical risks, and have significant psychological and social repercussions. Understanding parasomnia not only requires a grasp of its clinical features but also a reconsideration of the way society views and addresses sleep-related behaviors.

The origins of parasomnia are multifactorial and not fully understood. Some forms, such as night terrors and sleepwalking, are more common in children and are generally linked to incomplete transitions between sleep stages. These episodes often fade with age, but in some cases, they persist into adulthood or resurface due to triggers like stress, sleep deprivation, or medication. Other parasomnias, particularly those associated with REM sleep such as REM Sleep Behavior Disorder (RBD), may have neurological underpinnings and are sometimes early indicators of neurodegenerative diseases like Parkinson's or Lewy body dementia.

Despite the potentially dangerous and distressing nature of parasomnia, effective treatment strategies remain limited. Management often focuses on identifying and addressing underlying causes, such as sleep deprivation, stress, or medication effects. In some cases, medications like clonazepam or melatonin are prescribed, particularly for REM-related parasomnias. Behavioral interventions such as scheduled awakenings, sleep hygiene education, and safety modifications in

the sleep environment are also common recommendations. However, the efficacy of these approaches varies widely among individuals.

Technological advances offer promising avenues for improving the understanding and management of parasomnia. Polysomnography, or sleep studies, remain the gold standard for diagnosis, but are expensive and not always accessible. The emergence of wearable sleep trackers and home-based monitoring devices could help bridge this gap by allowing for long-term observation of sleep patterns in natural environments. Additionally, digital platforms can facilitate self-reporting, education, and remote consultation, making support more accessible. However, these tools must be used judiciously and in conjunction with clinical expertise, as misinterpretation of data can lead to anxiety or incorrect self-diagnosis.

Another area that deserves attention is the role of lifestyle and environmental factors in parasomnia. While genetics and neurological conditions may set the stage, triggers like irregular sleep schedules, alcohol consumption, or psychological stress can act as catalysts. This insight opens up possibilities for preventive strategies through lifestyle modification. Encouraging consistent sleep routines, stress management techniques, and awareness of medication side effects can help mitigate the risk of parasomnia episodes. Schools, workplaces, and community organizations should be involved in promoting these practices, especially since parasomnia can affect all age groups and social strata.

Children with parasomnia present a unique set of challenges. Night terrors and sleepwalking are more prevalent during childhood, and while often benign, they can be frightening for both the child and the caregivers. Parents may not know how to respond appropriately or may misinterpret the behavior as attention-seeking or emotional disturbance. Pediatricians and educators must be equipped with the knowledge and tools to provide accurate guidance. Early intervention, reassurance, and creating a safe sleep environment can go a long way in managing pediatric parasomnia and alleviating parental anxiety.

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