

STON



Compromised cortisol functioning places children at a greater risk for poor mental and physical health in adulthood (Manium, Antoniadis, & Morris, 2014).

Aim

To investigate the association of nighttime sleep onset, nighttime sleep duration, and morning wake time with child hair cortisol concentration.

Participants

Eighty-two healthy 3.5-year-old children (*nMale* = 41, nFemale = 42) aged between 40.16 and 47.43 months $(M_{age} = 42.37, SD = 2.45)$ from the greater Boston area.

Measures

Sleep characteristics

Redeker, 2018).

- Children wore a **mini-mitter actical** on their right ankle for three consecutive nights.
- Algorithms based on movement determined sleep onset time, sleep duration, and morning wake time.
- Parents completed the **Brief Child Sleep Questionnaire** (Mindell, Sadeh, Kwon, & Goh, 2013).

Hair cortisol concentration

- A sample of hair taken from the posterior vertex. The sample was hair taken **3cm closest to the scalp** and weighed 15-30 mg.
- Hair cortisol concentration is an **index of chronic stress** experienced over the **previous 3 months**.

Nighttime sleep onset associated with hair cortisol levels in 3.5-year-olds

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Sleep characteristics

	Actigraphy recorded		
	Onset	Wake	Duration
Mean	9:41pm	7:16 am	9hrs 35mins
SD	1hr 19mins	56mins	59mins

- < .001).
- .144).
- in hair cortisol.
- concentrations (Minkel et al., 2014).
- at a regular time each day for preschool.
- •
- adulthood.

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Results

Parent reported Duration 9hrs 50mins 1hr 13mins

Later nighttime sleep onset was associated with higher hair cortisol concentration (r (82) = .421, p

Shorter sleep duration was associated with higher hair cortisol concentration (r = -.399, p < .001).

Morning wake time was not significantly correlated to hair cortisol concentration (r(82) = -0.163, p = -0.163)

• A multiple linear regression established nighttime sleep onset and sleep duration (F(2,81) = 9.99, p < .001, adjusted R2 = .182) accounted for 20% of the variance

Nighttime sleep onset (B = .279, p = .044) uniquely contributed to hair **cortisol concentration**, but nighttime sleep duration (B = -.211, p = .124) did not.

Discussion

Early sleep onset may buffer the cortisol stress response, resulting in lower hair cortisol

Children who experience more stress may fall asleep later (Sadeh, Amiran, & Reut, 2000).

A lack of a unique association between sleep duration and hair cortisol may be due to children waking up

The relationship may be further explained by daytime **naps**, sleep **quality**, sleep **stages**, and household chaos (Scher, Hall, Zaidman-Zait, & Weinberg, 2009).

• Parents overestimated how much child their slept, reinforcing the use of actigraphy (Kushnir & Sadeh, 2013).

Healthy sleep habits may minimize physiological stress and could offer a cost-effective strategy to negating stress-related health problems in

• An earlier bedtime can be promoted through a regular bedtime routine, a cool, dark, quiet room, and no digital screens (National Sleep Foundation).

Acknowledgments



