

Perinatal Sleep Disturbance and Neural Processing to Infant Emotional Cues

Ellen Davis, Madeline M. Patrick, & Ashley M. Groh University of Missouri, Columbia



INTRODUCTION

- Sleep disturbance has been linked to poorer functioning, including lower quality parenting.^{1,2}
- Sleep is negatively affected during the perinatal period, and the maternal brain undergoes changes throughout the perinatal period to prepare for motherhood.^{3,4,5}
- However, little is known about how sleep is associated with the maternal brain during the perinatal period.
- We examined the significance of sleep during the third trimester and at 4 months postpartum in relation to women's neural responding reflective of attention to infant emotional cues (distress, happy, neutral) important for parenting.

METHODS

Participants

- During pregnancy assessment, participants were 167 women (M = 28.79 years, SD = 4.63), 81 women returned for the 4-month assessment.
- Mothers were predominantly white (84.1%) and middle income (median \$85,000).

Sleep

General Sleep Disturbance Scale⁶

Sleep Quality Subscale, Sleep Quantity Subscale, Medications Subscale, Total Sleep Disturbance Scale.

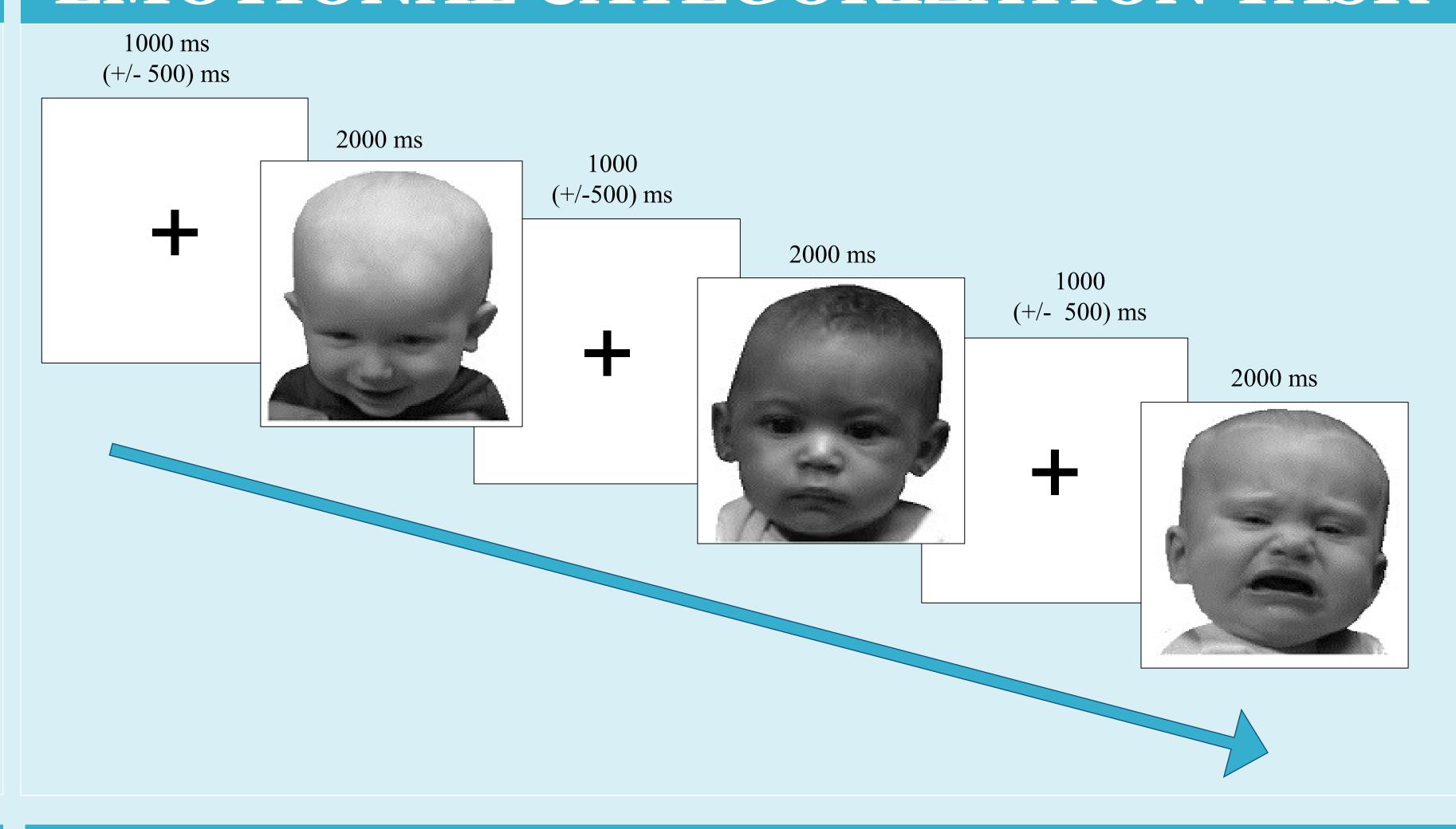
Emotional Categorization Task

- Participants completed a categorization task compromising 162 repeated infant images displaying distress (54), happy (54), or neutral (54) expressions.
- Facial expressions were viewed in series, and participants indicated the facial expression displayed (See figure 1).

Electroencephalogram (EEG) Recording

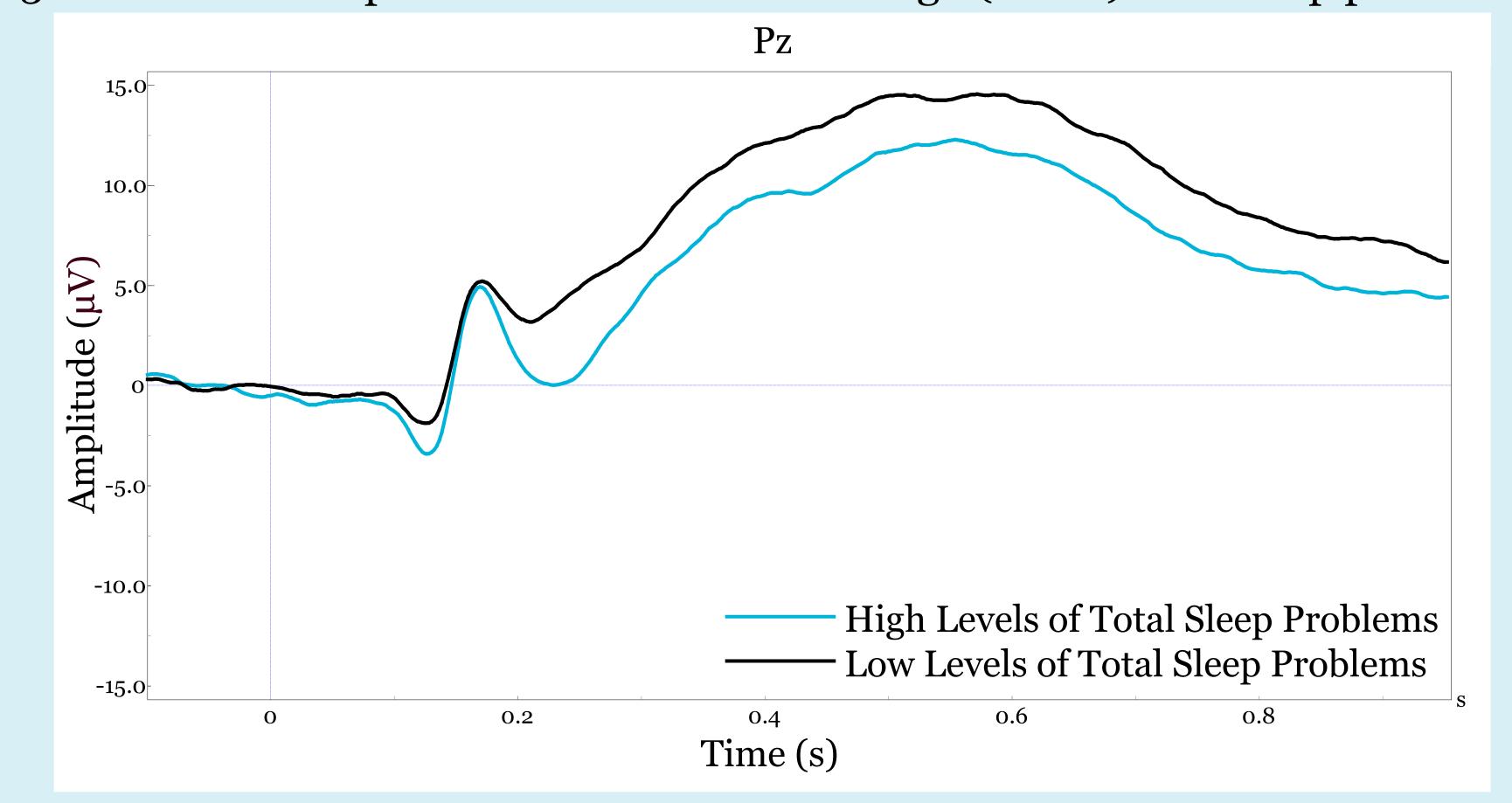
- The P300 is a neural response reflective of attention.⁷
- The P300 amplitude was defined as average activity in a 300 to 750 ms window following stimulus presentation at the Pz electrode.

EMOTIONAL CATEGORIZATION TASK



FIGURE

P300 to distress expressions for women with high (v. low) total sleep problems.



TABLE

Table 1. Intercorrelations between prenatal sleep variables and maternal neural responding to infant distress

responding to infant distress								
	Prenatal Sleep Quality		Prenatal Sleep Quantity		Prenatal Sleep Medications		Prenatal Total Sleep Disturbance	
Prenatal	r	p	r	p	r	p	r	p
P300 Amplitude	-0.06	0.457	-0.12	0.136	-0.20	0.011	-0.07	0.380
Postnatal	r	p	r	p	r	p	r	p
P300 Amplitude	-0.24	0.031	-0.25	0.026	-0.26	0.017	-0.29	0.010

RESULTS

Prenatal Sleep and Neural Responding to Infant Distress (see Table)

Prenatal Neural Responding

• Greater use of sleep medication was associated with a dampened P300 amplitude to distress faces.

Postnatal Neural Responding

- Poorer sleep quality was associated with a dampened P300 amplitude to distress faces.
- Too much/little sleep was associated with a dampened P300 amplitude to distress faces.
- Greater use of sleep medication was associated with a dampened P300 amplitude to distress faces.
- Greater total sleep disturbance was associated with a dampened P300 amplitude to distress faces (see Figure).

Prenatal Sleep and Neural Responding to Infant Happy and Neutral Expressions

• There were no significant associations between prenatal sleep and prenatal or postnatal P300 amplitude to happy or neutral faces.

CONCLUSION

- Poorer prenatal sleep was concurrently and longitudinally associated with neural responding reflective of dampened attention to infant distress.
- These findings suggest that prenatal sleep disturbance may negatively impact the neural changes the maternal brain undergoes to prime new mothers for sensitive parenting.
- Findings suggest that improving sleep quality during pregnancy may support the maternal brain during this sensitive period.

ACKNOWLEDGEMENTS

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Scan for references:



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Lab website:

