B. **Narcolepsy:** a sleep disorder characterized by uncontrollable sleep attacks. The sufferer may lapse directly into REM sleep, often at inopportune times.

C. **Sleep apnea:** a sleep disorder characterized by temporary cessations of breathing during sleep and repeated momentary awakenings.

D. **Night terrors:** a sleep disorder characterized by high arousal and an appearance of being terrified; unlike nightmares, night terrors occur during Stage 4 sleep, within two or three hours of falling asleep, and are seldom remembered.

E. **Sleepwalking/Sleeptalking:** Stage 4 sleep disorders most often experienced by young children. These disorders are usually harmless and children grow out of them as they grow older and deep Stage 4 sleep diminishes.

V. Dreams

A. **What We Dream**
   1. **REM dreams:** a sequence of images, emotions, and thoughts passing through a sleeping person’s mind.
      a) Dreams are notable for their hallucinatory imagery, discontinuities, and incongruities, and for the dreamer’s delusional acceptance of the content and later difficulties remembering it.
      b) REM dreams are so vivid we may confuse them with reality.
   2. **Manifest content:** according to Freud, the remembered story line of a dream.
      a) Incorporates traces of previous day’s experiences and preoccupations.
      b) Sensory stimuli in our sleeping environment may also intrude.

B. **Why We Dream**
   1. To satisfy our own wishes.
      a) According to Freud, a dream’s manifest content is a censored, symbolic version of its **latent content**, which consists of unconscious drives and wishes that would be threatening if expressed directly.
   2. To file away memories.
   3. To develop and preserve neural pathways.
   4. To make sense of neural static.
   5. To reflect cognitive development.
      a) Dream content reflects dreamers’ cognitive development - their knowledge and understanding.
   6. **REM rebound:** the tendency for REM sleep to increase following REM sleep deprivation.

**Section 2: Hypnosis**