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What's keeping you awake at night?

Symptoms and consequences of chronic insomnia

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Getting a good night's sleep may be far more important than you think. All of us know the feeling of being overly tired after even one or two nights without enough sleep. Yet, are you aware that inadequate sleep over a longer period of time - a chronic sleep problem - can be associated not just with mental and physical fatigue, but also with a number of potentially serious medical conditions? Insomnia -- defined as difficulty falling asleep or staying asleep despite having enough time to sleep -- is a problem when it interferes with your ability to perform physical, social, or occupational functions. Difficulty falling asleep or staying asleep at least three times a week for at least one month is classified as chronic insomnia.

Symptoms and consequences of chronic insomnia

Difficulty accomplishing tasks, coping with changing situations, controlling mood and maintaining satisfactory personal or family relationships. Loss of vitality and anxiety are also common. Work-related problems, including absenteeism, are more common among insomniacs than in the general population, as are job performance and job

satisfaction issues. In addition, insomniacs have a higher occurrence of serious accidents.

A serious health risk

Studies show that chronic insomnia is associated with heart and lung disease, hypertension, stroke, depression, diabetes, and obesity -- all potentially very serious illnesses. Although we cannot say that insomnia causes hypertension or that diabetes causes insomnia, it is quite likely that the conditions have an impact upon each other. In addition, overuse of hypnotic drugs and over-the-counter and herbal remedies is also associated with chronic insomnia.

Causes and factors of chronic insomnia

- Excessive worrying
- Illness -- including painful arthritis, congestive heart failure that causes difficulty in breathing, and gastroesophageal reflux disease (GERD), among others.
- Medications -- for example, some drugs for hypertension and decongestants have stimulating effects; there are many others.
- Consuming caffeine within six hours of bedtime.
- Lack of physical activity and/or exposure to natural outdoor light.
- Sleep apnea, an obstruction of the airway, which can cause you to stop breathing repeatedly during the night. This forces the brain to keep waking you up to restart your breathing.
- Restless legs syndrome (RLS) -- which can make your legs so tingly that you feel an uncontrollable urge to move them.
- Prostate problems, urinary incontinence, or a urinary tract infection that makes you run to the bathroom several times a night.

Treating chronic insomnia

If you suffer from chronic insomnia, how do you decide upon treatment? Although a thorough medical evaluation may be necessary, it might be helpful to try the suggestions below first.

Do not:

- Drink caffeinated beverages for at least 6 hours before going to bed. This includes coffee, tea, and soda.
- Drink alcohol at bedtime or during the 2 hours before bedtime.
- Smoke cigarettes for at least 4 hours before bedtime.
- Fall asleep with the television on.
- Exercise within 4 hours of going to bed.
- Read stimulating material while in bed, just before turning out the lights.
- Take a long nap during the day (more than 30 minutes); it may be best not to nap at all.
- Go to bed too hungry or too full. If hungry, a light carbohydrate snack (e.g., crackers with milk) may help.
- Use your bed as a place to eat, drink, smoke, watch TV, or gather for family arguments or discussions.

Do:

- Go to bed at the same time each night, and get up and out of bed at the same time each morning.
- Keep your bedroom/sleeping area dark, cool, quiet, restful, and comfortable.
- If you cannot fall asleep within 20 minutes, get out of bed and do something boring until you feel sleepy.
- Enjoy physical activity, outdoors if possible, during the day (at least 4 hours before bedtime).
- Take a hot bath 60-90 minutes before bedtime.
- Listen to soft or soothing music.
- Use visualization; picture a relaxing scene.
- Use your bed only for sleep and sex.

If these suggestions do not succeed in helping you sleep, or if you think you might have one of the conditions in the list of factors above, it is a good idea to see your doctor. Make it clear that your problem with sleep needs his/her attention.

Medications

Certainly it's best not to use sleep-promoting medications unless they are necessary. However, if both you and your doctor decide that a prescription drug to promote sleep is required, then the medication might be very helpful. Until very recently, patients were strongly advised to limit their use of sleep medications to prevent addiction and other side effects. However, today some sleep medications are thought to be relatively safe and effective for use over a long period of time.

The two types of medications most suited for sleep assistance are the benzodiazepine analogues (such as zolpidem) and a new melatonin analogue called ramelteon. Both types can cause side effects. However, ramelteon is not a controlled substance and thus far has not been shown to have potential for abuse.

If you are an older person with insomnia, you don't have to suffer. There are a number of helpful options available. See your physician and insist that your complaints regarding sleep are heard.

Older people need plenty of sleep

A common misconception is that older individuals require less sleep; many older people themselves believe they need less sleep than younger people. However, a national Gallup Poll of more than 1,000 adults 50 years of age and older found that a large majority believe sleep is very important for healthy aging, and 34 percent believe they need more sleep than they are currently getting. A quarter believe they have a sleep problem, and 18 percent report using one of the following popular (not prescribed) "sleep aids" every night: alcohol, herbal preparations, over-the-counter antihistamines and cold remedies, audio tapes, melatonin, and prescription medications not intended to help with sleep problems.

While it is true that the amount of sleep required varies from person to person - some individuals need only 5 or 6 hours nightly, whereas others need 8.5 or 9 hours - it is generally accepted that everyone, regardless of age, functions best with 7 to 8 hours of sleep each night. For those who go to sleep at 9 pm, that may mean waking up at 4:30 am. Actually, this is perfectly fine, but many believe they "shouldn't" get up until 6:30 or 7 a.m. and therefore worry that they're not getting enough sleep. Simply put, people who want to get up at 7:00 a.m. should go to sleep at 11:00 or 11:30 p.m.

References

- Gallup Poll. October 2005. "Sleep and healthy aging." The Gallup Organization. Princeton, NJ.
- Leipzig RM, ed. 2006. "The benefits of a good night's sleep." Focus on Healthy Aging. 9(5):1.
- Sleep and Healthy Aging: Scientific Consensus Conference Report. 2005. New York: International Longevity Center-USA.
- AARP. 2003. "Getting Your Zzzzzzz's: How Sleep Affects Health and Aging." New York: International Longevity Center-USA.
- Zee P, Bloom HG. May 2006. "Understanding and resolving insomnia in the elderly." Geriatrics, 61:5.
- Fleming J. ["Nine rules of sleep hygiene."](#)
- St. John D. 2000. ["Sleep hygiene."](#)
- Tips for [successful sleep](#).

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