



# Blackrock Medical Clinic

## Sleep, a Guide

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Introduction

Chronic poor sleep is not just annoying and debilitating, but it is also associated with an increased risk of heart disease, dementia, some cancers, diabetes and obesity. Understanding normal sleep, its variants and factors which disrupt it can help get you back on the path to a healthy and refreshing sleep routine.

How much sleep do I need?

The amount of sleep one needs varies from individual to individual and throughout the course of your life. There are recommendations but some people are natural ‘short-sleepers’ and others require more. As you age the amount generally reduces. Both mental and physical exercise can increase the amount of sleep someone requires. Whatever the amount you need, insufficient or poor sleep can affect your health.

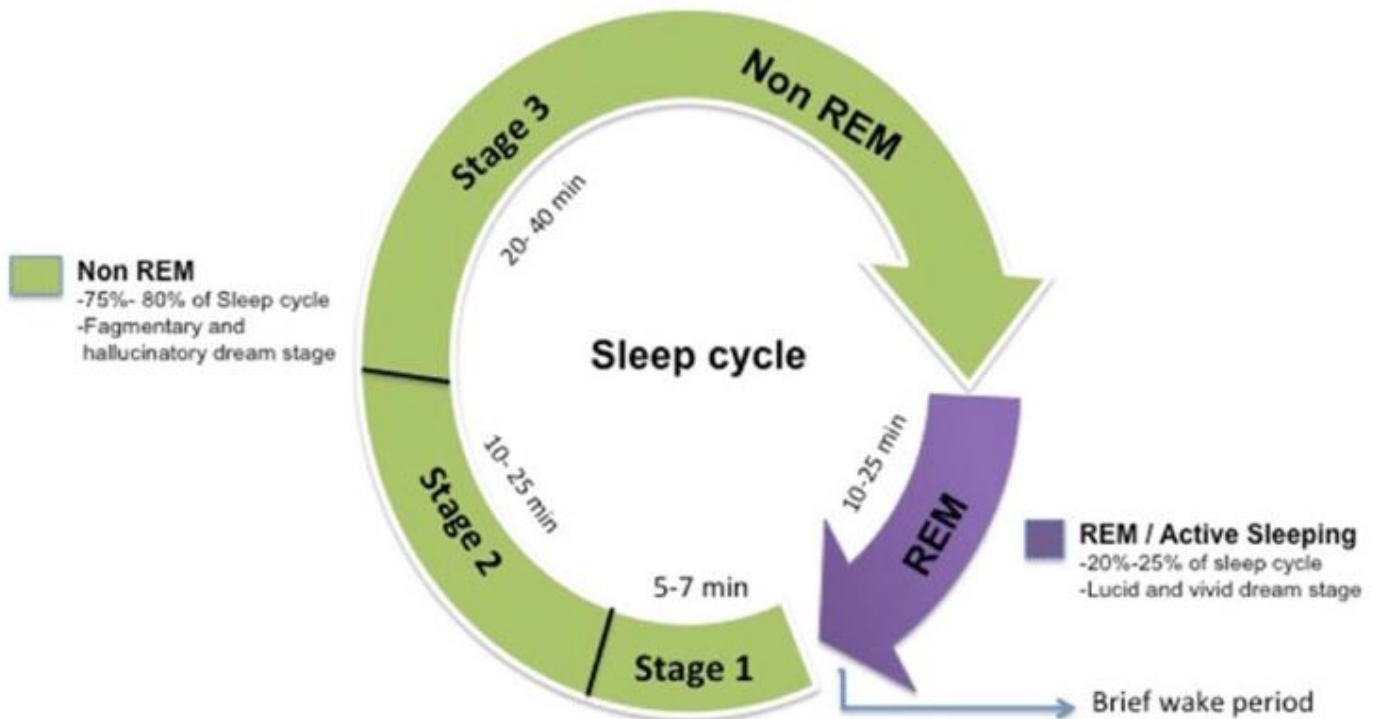
Age Group		Recommended Hours of Sleep Per Day
<b>Newborn</b>	0–3 months	14–17 hours (National Sleep Foundation)
<b>Infant</b>	4–12 months	12–16 hours per 24 hours (including naps)
<b>Toddler</b>	1–2 years	11–14 hours per 24 hours (including naps)
<b>Preschool</b>	3–5 years	10–13 hours per 24 hours (including naps)
<b>School Age</b>	6–12 years	9–12 hours per 24 hours
<b>Teen</b>	13–18 years	8–10 hours per 24 hours
<b>Adult</b>	18–60 years	7 or more hours per night
	61–64 years	7–9 hours
	65 years and older	7–8 hours

Types of Sleep

Many people think of sleep as either on or off, like a lightbulb, but there are different types of sleep. In general, these are broken into 2 categories, REM (rapid eye movement) and NREM (non-rapid eye movement) sleep. REM sleep

occurs several times in a night and is where most dreaming is thought to occur. NREM sleep is broken down into 3 stages, light, deeper and deepest.

A sleep cycle typically lasts about 90 minutes and has a brief waking phase which may not be remembered in the morning. On a typical night an adult,



who sleeps well, will spend about 20% in REM sleep and 5%, 50% and 25% in stage 1,2 and 3 NREM sleep respectively. By the age of 70 a typical adult will spend less than 10% of their time in deep sleep. This is normal. So, as we age, we sleep less, and we sleep lighter, and this is normal.

### Sleep Deficiency

Sleep is a basic human need like, breathing, eating, and drinking. Getting insufficient sleep, both time and quality, will cause symptoms such as decreased focus, irritability, difficulty with emotions, fatigue, anxiety, and stress. It is also linked to many chronic health problems such as obesity, cardiovascular (heart) disease, high blood pressure, diabetes, stroke, renal (kidney) disease and depression. Of course, with fatigue and poor concentration there is a greater risk of accidents including falls and road traffic collisions.

## What Causes Poor Sleep?

### Ageing

As we have already explored sleep changes as we age with older people sleeping less deeply, requiring less sleep, and tending to nap during the day.

### Poor Sleep Environment

Light, noise and temperature can affect your sleep. Sleeping in a strange environment or being uncomfortable can be detrimental.

### A Disturbed Routine

People who work shifts or unusual hours often have disturbed sleep. This is particularly pronounced where you sleep outside the normal light/dark diurnal rhythms e.g. night shifts.

### Stress, Worry and Anxiety

If someone is worried or stressed their body will be tense and they will be prone to sleep disturbance. They may even be stressed about going to sleep, or watching the clock which is, ironically, keeping them awake.

### Bereavement

The emotional trauma of bereavement may keep someone awake. It is common to have nightmares or upsetting memories.

### Stimulant Drugs

Caffeine, alcohol, nicotine or other drugs can cause sleep disturbance. Sometimes people take drugs to help them sleep but because they affect the type of sleep, they often cause longer term sleep problems.

### Medical Problems

- Needing to go to the toilet at night: It is common to need to pass urine at night. Most people over the age of 60 need to get up at least once at night. If this increases or you have other urinary symptoms see the GP.
- Pain: Aches and pains from arthritis etc can disturb sleep.
- Menopause: most women have some difficulty with their sleep around and after the menopause, often related to hot flushes.
- Depression: It is common for people suffering from depression to wake early in the morning and have difficulty getting back to sleep or have problems getting off to sleep.
- Obstructive sleep apnoea: this is a treatable medical condition which often goes unnoticed by those affected. If a partner notices you snore

and breath loudly with long pauses in your breathing and gasping, this may be the problem. It is associated with overweight and obesity, smoking and alcohol.

- Restless legs: This is the urge to move your legs, particularly at night, and may be quite uncomfortable. Some medications may make it worse, and some help and it is more common with age.
- Other medical causes could be diabetes, breathing difficulties, blood pressure or perhaps a combination of factors.

## What Sort of Problem do You Have?

### Getting to sleep

The most common sleep problem with some people taking hours to get to sleep but then sleeping well.

### Staying asleep

The second most common sleep problem with disturbed sleep pattern, regular waking in the middle of the night and difficulty getting back to sleep.

### Waking too early

Waking in the early hours and not being able to get back to sleep. More common with depression and anxiety.

### Poor quality sleep

Some people report restless sleep with poor quality leading to tiredness in the day.

### Sleeping too much

Particularly when people find themselves dozing during the day as well as sleeping longer at night.

## Resolving Your Sleep Problem

Understanding what kind of problem, you have will help you to resolve it. Be aware that you might not have a primary problem with sleep, your sleep might be a symptom of another issue. For example, if you can't sleep because you are in pain with arthritis the primary problem is the arthritis pain, not the sleep.

### Worrying, stress and anxiety

Perhaps you find yourself lying in bed worrying. This could be about anything, including about getting to sleep. You may worry that you are not getting

enough sleep, or that you will be tired in the morning. This makes you tense, keeps your brain active and makes it less likely that you will sleep.

Try some simple techniques: Bed is not a place to deal with any problems or stresses, you can sit down at the kitchen table tomorrow, with a notebook, and work through the things that worry you. Bed is a place for relaxation, sleep will come in its own time. Be aware that you don't control what thoughts pop into your head, but you do control what you do with them when they are there. If you create the right relaxing environment your thoughts will be less and less likely to be worrisome or anxious ones.

- Get yourself comfortable in your bed.
- Let your mind become aware of your environment, the warmth, the peace, your breathing, your body in the bed.
- Bring your focus to your toes, gently tense them and then, as you breathe out slowly feel any stress or tension fade from them as you relax.
- Work your way up bringing attention to your ankles in the same way.
- If you feel your mind wander or tension returning start again at the beginning.

There are many free recordings online that guide you through similar techniques.

It has also been shown to be effective to write down a few things that you are grateful for before you go to bed. You may also want to schedule some 'worry time' into your day. Like described above, this is some time where it is OK to worry, you have a notepad and can write down all the things that concern you. Try to write down even the smallest worries. Then, look at each entry and decide if it is something that you can do something about. If not, put a line through it (there is no point in worrying about stuff you can not change). If yes, write down all the things you can think of that may resolve it. Pick the best one and then write out all the steps you must take to implement it. Write down any obstacles that may get in your way and how you might overcome them. Then plan how you will put it into practice, put it in your calendar, or give yourself timeframes for tackling each step. You now have lots of little steps you can achieve and reward yourself for achieving.

If a thought pops into your head about any of these problems, you can simply dismiss it until the next 'worry-time'. It might already be on paper and therefore it doesn't need to occupy your head!

Other support can be found here: <https://www2.hse.ie/mental-health/services-support/supports-services/>

### Restless legs

Mild restless legs syndrome can normally be resolved with some simple lifestyle changes. Avoid caffeine, alcohol, stimulants and smoking. Do regular exercise but not just before bed. Get a good sleep routine as described later. Sometimes symptoms can be relieved by relaxation techniques, massage, having a cool shower before bed, walking, and stretching. Some people get a benefit from quinine which is found in Indian Tonic Water.

If the problem does not resolve, is severe, or may be linked to other health problems, see your GP to discuss treatment.

### Sleep Apnoea

Are you worried you might have sleep apnoea? This is more common in people who are overweight, in men, and in people over the age of 40. You might not be aware of it if you sleep alone although there are now some sleep apps that help look out for it. The main signs are loud snoring, long pauses and gasping. You may find you wake up with a gasp. You may notice you have had poor quality sleep and are tired throughout the day. This is a treatable condition and often lifestyle measures alone may be sufficient. Talk to your GP about making the diagnosis. You should consider losing weight, cutting back on alcohol, and doing regular exercise. Sleeping on your side can help but there are other treatments available through your GP.

### Good and Bad Habits

Habits are a set of actions (routine) we take, almost automatically, to a cue or trigger. They save brain power. A habit has proven an effective shortcut for some time. Each time it is used the shortcut becomes more refined. Like having to hack a shortcut through the jungle, the first time is hardest but the more often you go over it the better the path becomes until we have a well paved road from trigger to reward. When you decide to change, you need to create a new path. This takes effort to think through and all the while there is a nice, well paved road leading down the old habit route. If you put in the effort the old route will eventually crumble and the new path will get better and better trodden until it becomes the quickest route to your reward. This can take anywhere from a month to many months.

Understanding how a biological system works gives us some control over it.

### Good Habits

- **Routine:** Go to bed at the same time when you are sleepy and get up at the same time each day. Avoid naps during the day. Try to get some daylight during waking hours and try to keep to the routine at weekends too. You might want to activate a sleep reminder on your phone.
- **Relax:** Develop a relaxation routine before bed. You might want to do yoga or meditation or just have a hot malty drink. A warm bath while listening to relaxing music can help. Putting screens and phones away as you wind down.
- **Create a restful environment:** Make sure your bed is comfortable, the room is dark and a nice temperature. Use earplugs if noise is an issue or an eye mask for light. Perhaps some lavender oil on your pillow. Make sure to avoid TV and other screens in the bedroom.
- **Get up:** If you can't sleep, get up and keep the light levels low. Do something relaxing until you feel sleepy and then return to bed.
- **Get active:** Regular moderate exercise (gets you puffed) will help with sleep but be careful not to do it within an hour of bedtime.

### Bad Habits

- **Worrying:** Read the guide above if you find you worry in bed. Making a habit of worrying in bed primes your brain to stay awake. Do a relaxation technique instead and worry in your 'worry time'.
- **Bedtime activities:** Don't use your bed for anything other than sleep or sex. TV, reading or browsing on your phone all stimulate the brain to stay awake and make problematic associations between your bed and these activities.
- **Eating and drinking:** Don't eat or drink too close to bedtime and avoid alcohol, caffeine, nicotine, and other stimulants. An exception may be a hot malty drink as part of your wind-down routine.
- **Napping:** napping during the day will affect your sleep at night so avoid this and don't sleep in to 'catch up' on lost sleep.

These techniques have been shown to be effective with many people, but they take time, dedication, and hard work. Changing habits is not easy. If you think that your problem is more serious, or you are making little progress then see your GP to discuss options including CBT.



### Medication

Medication has a very limited role in sleep problems. Studies show that sleeping pills are not helpful in promoting a good night's rest with people getting, on average, only an extra 35 minutes of sleep. The type of sleep people get may be less restful and recuperating. They have significant adverse effects and can only be used safely for very short periods of time. They are associated with addiction, falls, memory problems, excessive drowsiness, hangover effects and can impair driving the next day.

### Summary

Sleep problems are many and varied. Most can be tackled with an effective plan, but this will require significant time and effort. Sometimes they are associated with other health problems, and it may help to discuss these with your GP.

More information can be found here: <https://www2.hse.ie/mental-health/issues/sleep-problems/>