

Insomnia

How much sleep do I need?

Sleep is a vital function for health and wellbeing. For adults, 7–9 hours sleep each night is recommended. For those aged over 65 years the recommendation is slightly less, 7–8 hours sleep. However, the amount each individual needs does vary. To ensure you are getting the right amount of sleep for you, it is helpful to ask yourself the following questions: are you happy, healthy and productive on the amount of sleep you are getting? Are you experiencing any sleep or health problems? Are you overweight? Do you feel sleepy whilst driving? Do you depend on caffeine to get you through the day?

If you are not sleeping well, it is important to identify why this might be happening.

What is insomnia?

Definitions of insomnia vary but generally it means:

- difficulty getting to sleep and/or
- difficulty staying asleep (poor sleep quality) and/or
- waking much too early.

The difficulty sleeping has some sort of impact during the daytime (eg, fatigue, difficulty concentrating, headaches, feeling irritable) and **occurs despite giving yourself enough opportunity to sleep**. There must be significant periods of lying awake, on more nights than not each week. Chronic insomnia disorder means this has lasted longer than 3 months (short term or acute insomnia has lasted less than 3 months).

What causes insomnia?

Insomnia is a very common problem. Many factors can contribute to insomnia, including:

- stress
- alcohol, nicotine and caffeine consumption
- depression or anxiety
- other medical conditions and medicines
- snoring and sleep breathing difficulties
- tooth grinding while 'asleep'
- ongoing pain
- restless legs
- poor sleep habits



It is important to manage insomnia

Daytime tiredness and sleepiness are not to be taken lightly. Being tired leads to poor performance and a much increased risk of accidents, such as when driving or at work. Concentrating, remembering, making decisions and solving complex tasks can also be greatly impaired.

Lack of sleep over many months or years can also have negative effects on your health and mood. Poor sleep increases the risk for conditions such as depression, anxiety, heart disease, high blood pressure and diabetes. It can also significantly reduce enjoyment of life and social relationships.

The good news is that there are many effective strategies to help improve sleep.

What can be done for insomnia?

It is important for your GP to know about your insomnia so they can work out the cause. There are specific treatments for insomnia depending on the cause.

It is especially important to talk to your GP if you are feeling excessively sleepy during the day or falling asleep at inappropriate times (eg, while driving) as this can indicate a specific sort of sleep problem (such as obstructive sleep apnoea or narcolepsy) which needs treatment (as well as daytime sleepiness being a safety concern).

Your GP will talk to you about your sleep patterns and associated symptoms, your lifestyle and any causes of stress. In a few situations you may be referred on to a sleep clinic for investigation.

Behavioural (non-drug) techniques have been shown to be effective for the long-term management of insomnia.

Sleep hygiene/good sleep habits

Sleep habits are the aspects of your lifestyle and your bedtime environment that might either interfere with or help promote better sleep. Whatever the cause of your insomnia, it is advised you attend to these aspects.

Tips for improving sleep habits

- Reduce or avoid caffeine (eg, coffee, tea, cola, energy drinks), cigarettes and alcohol, especially at night
- Go to bed only when you are drowsy
- Get at least 30 minutes of natural light outdoors first thing in the morning (no sunglasses so the morning light signals the brain via your eyes to 'awake' for the day)
- Exercise daily
- Avoid TV, computer screens, mobile phones for an hour or two before bed – the artificial light interferes with your natural cues to sleep – and keep them out of the bedroom (use the bed for sleep only)!
- Turn around any bedroom clocks – clockwatching makes insomnia worse
- Unwind before bed by reading or listening to music
- Make sure your bedroom is cool, dimly lit or dark, quiet and as comfortable for sleep as possible
- Create your own bedtime 'ritual' eg, write down the things to do tomorrow, make a hot, milky drink or take a warm bath – begin at the same time each night
- Avoid large meals late in the evening, but don't go to bed hungry (have a late snack).

Behavioural strategies for insomnia disorder

There are a number of strategies that can help when you have insomnia. Your GP can discuss these further with you or can refer you to an insomnia clinic or a sleep psychologist if required. People with insomnia often spend much more time in bed than they need. Often, people may go to bed when they are not actually sleepy and before the body's rhythms are ready to sleep. Limiting time spent in bed is one way to help make sleep less broken and of better quality. Your GP may suggest you limit your time in bed to around the amount of time you sleep (but not less than five hours). The time you spend in bed can then be slowly lengthened as your sleep stays less broken.

Often people who suffer from insomnia also feel anxiety symptoms or they may be 'wired' to find it difficult to relax and calm their 'busy mind'. Strategies such as daily mindfulness meditation and/or yoga and/or relaxation exercises (including deep breathing exercises) can be very helpful.

Medications for insomnia disorder

Sleeping pills

Sleeping pills can help, but they should only be used for short periods (eg, five to 10 days, ideally not daily), or on an occasional basis. They do not address the underlying causes of insomnia.

Sleeping pills do carry some risks. Some people can become dependent on medication to help them sleep. If taken for longer periods, the medication may not work unless a larger dose is taken. Some people can also get 'rebound insomnia' when coming off sleeping pills. Combining sleeping pills with alcohol or some other medicines can be dangerous.

Sleeping pills also have some side effects: confusion, sedation, amnesia and impaired co-ordination. These do not occur in everyone but they can lead to falls or being unsafe while driving or performing other tasks, especially if their effects are still felt in the morning.

If you are taking sleeping pills it is important to take them as prescribed by your GP and not to combine sleeping pills or increase the dose unless you have spoken to your GP.

Melatonin

Melatonin is a natural hormone that helps regulate your body clock – it provides a cue for feeling sleepy. The natural production of melatonin in the body varies over 24 hours and is suppressed by daylight. Melatonin production declines with age. Prolonged-release melatonin tablets are a prescription treatment for insomnia disorder if you are aged over 55 years (short term treatment). Melatonin may cause drowsiness but is not thought to have any serious adverse effects. Melatonin is not thought to cause dependency, tolerance (where an increased dose is required for the same effect), or rebound insomnia. It should not be taken with alcohol or other sleeping pills. The most effective long term solution for insomnia is addressing the underlying causes and using specific behavioural techniques for management.

Additional information

The Sleep Health Foundation

www.sleephealthfoundation.org.au

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