

Date: 5/27/2008 Patient: Elizabeth Test

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Insomnia

What is insomnia?

Having insomnia means you often have trouble falling or staying asleep or going back to sleep if you awaken. Insomnia can be either a short-term or a long-term problem.

Insomnia affects 1 in 3 adults every year in the US.

How does it occur?

Causes of insomnia include:

- stress such as a big deadline at work, a financial problem, or a sick family member
- being overweight
- depression, anxiety, or other mental health problems
- medical problems such as sleep apnea or hyperthyroidism
- restless leg syndrome (muscles in your lower legs twitch or tense up during sleep).
- use of caffeine or other stimulants
- use of alcohol, other depressants, or sedatives, which can relax you but lead to shallow sleep that starts and stops, especially if you use these drugs for a long time
- medicines, such as those used to treat asthma
- pain and other discomfort caused by an illness such as arthritis
- shortness of breath caused by chronic obstructive pulmonary disease (COPD) or heart failure
- poor sleep habits, including going to bed at different times or in a noisy environment, or eating or working in bed before sleeping
- changes in sleep patterns because of different work hours or travel (jet lag).

Insomnia may be temporary (called situational insomnia) or ongoing (chronic insomnia).

Situational insomnia occurs with a stressful event. It is often caused by noise, pain, worry, or family, work, financial, or school problems. It lasts 3 weeks or less. This kind of insomnia generally goes away when the stressful event is over or resolved.

Chronic insomnia can be caused by irregular sleep-wake patterns resulting from shift work, drug dependency (including long-term use of sleeping pills or alcohol), stress, illness, or mental health problems such as anxiety or depression. It lasts longer than 3 weeks and requires treatment of the underlying problem.

What are the symptoms?

Symptoms include:

- trouble falling asleep (taking longer than 45 minutes)
- awakening often in the night
- waking up early in the morning and being unable to go back to sleep
- not feeling rested in the morning or feeling tired during the day
- restlessness or anxiety as bedtime approaches.

How is it diagnosed?

Your health care provider will ask you about:

- your sleep patterns
- use of caffeine, alcohol, medicine, and other drugs
- eating and exercise habits
- your mental and physical condition
- your medical and mental health history, and your family's history
- your job and travel patterns.

Your health care provider may also ask your spouse, bed partner, or other family members about your sleep habits. After talking with you, your health care provider may give you a physical exam. A blood sample may be taken for lab tests.

Your health care provider may ask you to take notes each morning about:

- how long you were in bed
- how much time you think you actually slept
- how many times and what times you woke up
- what time you got up in the morning
- your thoughts about the quality of your sleep
- whether anything unusual happened.

Your health care provider may suggest that you sleep overnight in a sleep center. At the sleep center you may have a continuous, all-night recording of your breathing, eye movements, muscle tone, blood oxygen levels, heart rate and rhythm, and brain waves.

How is it treated?

When appropriate, your health care provider will prescribe treatment for underlying problems that are causing the insomnia. For example, if you have depression, medicine used to treat depression should help the insomnia. If drug or alcohol abuse is the cause of your insomnia, the treatment is to help you to stop using these substances. If you have chronic insomnia, it must be treated with management of the underlying problem.

In some cases of temporary insomnia, your health care provider may prescribe medicine to help you sleep until the stressful event is over or resolved. Counseling may also help you deal with psychological problems or reduce stress that may cause or contribute to your insomnia.

Some sleeping medicine can be addictive. Your health care provider will work

with you to choose the right medicine for short-term or long-term use.

Your health care provider may recommend relaxation techniques, changes in diet, cutting out caffeine, and a healthy lifestyle that includes exercise. Your provider also will probably discuss good sleep habits and a regular sleep routine.

How long will the effects last?

Often insomnia lasts for just a few nights. If you cannot sleep almost every night for 2 weeks, tell your health care provider. Insomnia that lasts this long usually continues until the cause is identified and treated.

How can I take care of myself?

- Tell your health care provider if the treatment plan doesn't help.
- Tell your provider if you have side effects from medicine prescribed for the insomnia.
- Follow your provider's instructions for follow-up visits.

How can I help prevent insomnia?

Practice good sleep hygiene:

- Establish a regular bedtime and wake-up time and stick to them even on weekends.
- Avoid taking naps.
- Exercise regularly during the day. Avoid exercising in the evening.
- Keep light levels very low after sunset and keep the bedroom very dark.
- Keep the bedroom at a cool temperature.
- Use the bed only for sleep and sex, not for reading or watching television.
- Go to bed when you are drowsy and get up when you are wide awake.
- Avoid caffeine, other stimulants, cigarettes, and alcohol. Do not drink alcohol within 6 hours of bedtime. If you smoke, try to quit smoking entirely. Cutting back on smoking without quitting may lead to nicotine withdrawal in the middle of the night that awakens you.
- Eat lightly at the evening meal and avoid snacks after supper.
- Lose weight if you are overweight.
- Learn to use relaxation exercises.
- Meditate for 20 minutes before you go to bed.
- Read something light or entertaining just before you go to bed, to get your mind off the day's troubles.
- Consider having white noise in the background, such as a fan blowing.
- Try not to focus on falling asleep. For example, don't keep checking the clock and worry about why you are not asleep yet. If you are awake for more than 20 minutes, leave the bed and do not go back to bed until you feel ready to sleep.
- Try to reduce stress in your life by changing the things that cause stress.
- Keep a "to do" journal. Before you go to bed, write down all the things you are worrying about. Then write down what you can do tomorrow. Mark the

other things as things to do later in the week. This will help clear your mind of worry.

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