**Happiness also means experiencing Good Night Sleep**

* Dr Vijay Harbishettar

**Case vignette**

A 70 year retired Government Official complains of not able to fall asleep till midnight, complains of sleeping till 5 AM only and feels he has slept only 4 hours at night. On enquiry, family members report he sleeps for approx. 3 hours post lunch every day. He has asked his General Practitioner for sleeping pills to fall asleep, who has refused to prescribe long term. He has been advised sleep hygiene measures. He takes medications regularly for his high Blood Pressure and Heart Disease.

**Case Discussion:**

This elderly person is reporting sleeping in total of 8 hours every day by his own account. The average total requirement of sleep for Persons above 60 years of age is between 6-7 hours per day. It appears that this gentleman is sleeping over and above his sleep requirement. Despite this, he feels, he has not had adequate sleep.

Ageing is associated with reduction in amount of Dream sleep (called REM sleep) and Deep Sleep (NREM stage 3). The amount of stage 2 of NREM or otherwise called light sleep may be more in some people making them feel they have not had adequate sleep. Feeling having inadequate sleep despite sleeping adequate hours for their age, can also be because of sleep misperception syndrome. The worry over not sleeping enough than actual insomnia if any, can be troublesome and gives rise to anxiety or fear.

Their routine daily activities need to be monitored. Their lifestyle, spending more time home, not doing much of activity, and just waiting for the time to pass to be looked into. Probably not knowing the amount of sleep required by the elderly person, and counting hours at night, and then worrying over not having adequate sleep could have the main issue in the case. This can be dealt by appropriate counselling that includes clarifying his mis-conceptions about his sleep.

International studies have shown insomnia (which means not able to fall asleep or maintain sleep or waking early in the morning or inadequate sleep) is reported in up to 70% of the elderly people in the community. 15-20% could be taking one or the other sleeping pill. Sleep apnea and Circadian Rhythm Sleep Disorders are other common ones.

**Sleep Apnea**

In Sleep Apnea, family members may notice there are period of breaks in between the snoring could be because of discontinuation of breathing for few seconds following which the person wakes up for few seconds and then goes back to sleep. This pattern continues. Due to frequent awakenings at night, their total sleep period may be compromised. They feel sleeping during the day affecting their ability to perform in education or work.

**Dreams and Nightmares**

Having frequent scary and bad dreams otherwise called nightmares can also occur. Nightmares can lead to avoidance of sleep affecting the total sleep duration. Occasional nightmares are welcome, and may help feel relaxed following day. This occurs during REM sleep or otherwise called Dream Sleep Phase. It is alright to dream but not frequent nightmares. Seek consultation with a Psychiatrist for frequent nightmares affecting behaviour or mood and this is treatable. Sometimes, these nightmare can be a sign of underlying anxiety or depression that needs treatment.

**REM Behaviour Disorder**

There is another condition called REM Behaviour Disorder, where generally all muscles get paralysed (except eye muscles) when person is in dream sleep, unusually muscles become unparalysed and then they may enact during dreams, that can be dangerous to sleeping partners or to themselves. This condition can occur as part of early stage of Parkinson’s disease and so need to see Neurologists at the earliest.

**How is sleep and its quality assessed?**

Information from the person and family members is gathered. Sleep diary for at least two weeks completed by the person is examined. This diary includes what time the person went to bed and got out of bed, approx. time of falling asleep, wake up times, and any awakenings including use of wash room and also use of coffee is also noted.

Use of excessive caffeine, drinking excessive water before going to bed, exercising before bed time will delay sleep onset. Alcohol use and Sleeping pills may appear to help by reducing time to fall asleep and increase sleep duration, but the quality of sleep that involves quantity of Deep Sleep (NREM Stage 3) and Dream sleep (REM) is reduced. There is no pill at this moment in the world that can mimic natural sleep.

If a person is sleep is deprived of sleep for last few nights, the architecture of the sleep which means the cycles involving light sleep, Deep Sleep and Dream Sleep phases adjust and adapt itself by changing its quantity and timings, to restore the overall quality of sleep. There is no need for the person to sleep that many extra hours.

Any physical or mental illness can impact on sleep. Sometimes, not able to sleep or excessive sleep or feeling drowsy most times can be the first sign of the underlying physical or mental illness. Common ones include stress related illness such as Depression, Anxiety or common physical illness like Diabetes, Hypothyroidism.

**Insomnia**

Insomnia can cause irritability, headaches, lack of concentration and affect their behaviour during following day. Insomnia occurring for long time need attention as this can reduce the body’s immune response, affect heart, increase Blood Pressure and increase risk of overweight. Best to see General Physician or a Psychiatrist to sort out insomnia at the earliest. Doctors may prescribe sleeping pills like medication for short term, and this must not be made a habit. Many of these medications are supposed to be dispensed by Pharmacist at appropriate prescriptions only. After short term use of these medications, one should seek advice to come off these medications. Longer term use of some of these pills are known to affect memory and other related abilities.

**Awareness of Normal Sleep**

There is lack of awareness about normal and abnormal sleep among people. People should discuss about their sleep and clarify their any beliefs or mis-conceptions with their regular Doctor they visit. Their regular Doctor will be able to manage in the first instance. If need be they may be referred to a specialist with experience managing sleep disorders. They may keep a diary of their sleep for two week period. This diary should include what time they went to bed, approximately when they seemed to have fallen asleep, any awakenings and what time their sleep ended. It should also include any medications they have used and amount of coffee intake.

Sleep is not a rest and brain is active during sleep. Sleep helps in improving memory function for the person. Adequate sleep duration with quality which means appropriate proportion of Deep and Dream sleep is important for the improving immunity, reduce chances of heart diseases and overall good functioning during the daytime. Physical well being leads to good sleep and vice-versa.

**Sleep Hygiene Measures:**

* Have a regular time to go to bed and wake up
* If in doubt maintain sleep diary
* Use bed/ bedroom only for sleep
* Use cotton bedsheets, comfort beddings
* Avoid excessive or Blue lightings in bedroom
* Make your bedroom noise free and free from excessive light
* No coffee or smoking after evening 6 PM
* No heavy meal before bedtime, avoid excessive spices
* Have enough fibre in your diet
* Avoid drinking excessive water before bedtime
* Avoid clock watching at night if you are not falling asleep
* Do not watch exciting movies or crime story or fear creating things on television
* You may watch anything that is boring
* Praying to your Almighty or chanting mantras before bedtime is good
* Many people benefit from practicing meditation before bedtime
* Don’t dwell over not having had good sleep previously
* Worrying is worse than the actual insomnia
* Morning hours are best for exercise, best to expose self to early morning sunlight
* Coffee in limits especially in morning may be okay for some
* It is alright to use wash room in the middle of night, don’t check messages on phones
* Avoid smartphones before bedtime
* Understand body has mechanisms to correct its sleep, have faith in it

**Author:**

Dr Vijaykumar Harbishettar

Consultant Psychiatrist

Padmashree Diagnostics (Medicare),

Vijayanagar, Bangalore 560040

Email: harbishettar@gmail.com