
SLEEP SELF-CARE

All of us have trouble sleeping from time to time. This is perfectly normal. Sleep problems (also known as *insomnia*) are often triggered by sudden life changes that lead to increased stress. For instance, following the death of a loved one, a car accident or a promotion to a new job, many people experience difficulties getting a good night's sleep. This normal response to stress usually lasts for a short time, rarely longer than a week or two. However, some people have chronic problems sleeping which do not seem to go away.

If you are one of these people, or you are having temporary insomnia, this Self-Care Guide should help. It will give you some general information about sleep, as well as provide a number of helpful suggestions to aid those with sleep problems. Read it carefully, as many common sleep problems are caused by one's own habits, and by adopting some of the following sleep-promoting behaviors, most people can get a good night's rest without the aid of drugs.

Taking sleeping pills is not the answer!

For people whose only complaint is *I can't sleep well* or *I can't get to sleep easily*, taking sleeping pills may do more harm than good. Most authorities recommend against the regular use of sedative drugs (like Valium, Dalmane, Librium and barbiturates) for the following reasons:

- Sedatives change nervous system activities during sleep; for example, they may reduce the normal periods of dreaming. After taking sedatives for awhile and then stopping, many people report having sleep-disrupting dreams, which cause them to wake up feeling tired even after a full night's sleep.
- The human body develops tolerance to sedatives after their repeated use. After a while, you have to take more and more sedatives to make you feel sleepy.
- A person can become psychologically dependent on sleeping preparations; if you are convinced that is the only way you can get a good night's sleep, you will not be able to go to sleep without a drug.

What is sleep?

Studies have shown that there are two types of sleep: (1) **REM sleep** – associated with dreaming and rapid eye movement (REM), and (2) **non-REM sleep** – four stages ranging from light to deep sleep. Each night as you sleep you pass through four to six cycles that include REM and non-REM sleep. At some times you are in a deeper sleep than at other times even though you may have been sleeping for a number of hours.

What determines when and how long we sleep?

Your daily rhythm pattern (circadian rhythm or the body's *inner clock*) largely determines the timing of your sleep as well as the timing of other body functions. For example, the sleep/wake cycle, body temperature and secretions of certain hormones follow the 24-circadian rhythm pattern. Your temperature is lowest during the night and in the morning; it rises steadily all day, peaks a few hours before bedtime, then starts to fall.

The stimulus of light regulates this rhythm in both humans and animals. In people, social factors also regulate this rhythm. For example, a farmer may go to bed and awaken when his chickens do, but a city dweller may stay up and watch late TV shows every night and awaken just in time to get to work on time.

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How much sleep do I need?

Researchers don't know exactly how much sleep adults need, although some data suggest that 7-8 hours per 24-hour period is the most satisfactory amount. Generally, the amount of sleep required is an individual matter. Some people feel rested after 5 to 6 hours of sleep; others sleep 9-10 hours. Most adults sleep about 7-8 hours in a 24-hour period. Children sleep more than adults and, in most cases, the elderly sleep less than they did as younger adults.

Why do I have difficulty sleeping?

Many factors can cause sleep problems. Your medical provider will help you find the reasons why you have difficulty. Some common causes are:

- **Stress:** Any abrupt change in your life – such as adjusting to college or graduate school, the end of a relationship, or serious illness – can cause stress and, possibly, sleep loss. Stress-induced sleep loss may last several days but rarely more than three weeks. Medication is usually unnecessary for this condition.
- **Physical illness and psychological problems:** Illnesses, particularly ones that cause pain, can interfere with sleep. Anxiety and depression also are common causes of disrupted sleep. Counseling and/or medication for the anxiety or depression usually help the sleep problem as well.

Consult your clinician if your insomnia continues to be a problem, especially if it is accompanied by pain, difficulty breathing, heavy sweating, unusual leg sensations, or by severe anxiety, depression, or unusual thoughts. Treatment and elimination of these causes may eliminate insomnia.

Delayed Sleep Phase Syndrome

If you have difficulty falling asleep but sleep soundly once you do get to sleep, you may be a night owl. Your body's inner clock may be set for sleep to occur from 2AM to 10AM, rather than 11PM to 7AM. Many night owls work an evening or night shift; others try to readjust their time clocks by slowly moving up their bedtime.

Observe your behavior

Before asking your clinician for medication to help you sleep, there are some steps you need to take.

The first step is to take the time to observe your behavior patterns. Many things you are doing in your daily routine probably lower the odds of getting a good night's sleep. The list on the following page will help you to identify these insomnia-producing behaviors.

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Insomnia-producing behaviors

Check those questions for which you can answer YES.

- Do you go to bed and get up at a different time every day?
Establishing a regular schedule helps to regulate your body's inner clock.
- Do you take naps during the daytime or in the evenings?
Falling asleep in front of the television at 7PM will make it more difficult to sleep later that night.
- Do you drink coffee, tea or sodas after 3PM in the afternoon?
Many soft drinks, as well as coffee and tea, contain caffeine, a powerful stimulant. Certain headache preparations, like Excedrin, also contain caffeine and should be avoided before bedtime.
- Do you smoke a cigarette, pipe or cigar before retiring?
The nicotine in tobacco is also a stimulant and can keep you up.
- Do you sleep in a noisy bedroom?
If you can't block outside noise, "cover" it with a familiar noise like the steady hum of a fan.
- Do you try to sleep in a room with a lot of light?
If street lights shine in your room, or if you must sleep during the day, buy special room-darkening shades.
- Do you drink alcohol in the evenings?
A glass of wine can be relaxing, but too much alcohol will lead to disturbed sleep. When the alcohol wears off during the night, you may experience periods of wakefulness and/or nightmares.
- Do you get into heated arguments with your roommate or partner or work on your school assignments right before bedtime?
Stirring up strong emotions or feeling stressed before bedtime will make it much more difficult to fall asleep. Instead, try watching a mindless TV show or reading a light novel.
- Do you use your bedroom for working/schoolwork or watching TV?
Don't. Learn to associate that room with sleep. Sexual activity is the only exception to this rule, as sexual release is a powerful sleep-inducer.
- Do you share a bed with a snoring, cover-stealing or restless partner?
If you do, make temporary sleeping arrangements until you establish a satisfactory sleep pattern.

Now look back at the behaviors you checked. The items you checked are behaviors that reduce your chances of sleeping well. The first step of your self-care program is to change these behaviors. Taking this action will eliminate many sleeping problems.

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Additional Suggestions for Inducing Sleep

If you are still having a hard time falling asleep, here are some additional suggestions. You don't have to do all of them, but choosing one or two will help most people get a good night's sleep.

- Get some exercise each day. Regular walks, bicycle rides or whatever exercise you enjoy will help you sleep better, as long as you avoid vigorous exercise right before bedtime.
- Take a warm bath 45 minutes before bedtime. This will help relax tense muscles and set the mood for sleep.
- Drink a glass of warm milk 30 minutes before bedtime. Milk contains an amino acid, L-tryptophane, used by the brain to facilitate sleep, or try an herbal tea (like chamomile or peppermint) with natural relaxing effects.
- Learn relaxation/tension release exercises (like deep breathing or progressive muscle relaxation). *The Wave* is an example of this kind of exercise. Instructions for *The Wave* are included on the following page. Do *The Wave* before you go to sleep. Don't wait until you can't sleep.
- If you can't fall asleep within 20 minutes of going to bed, get up and pursue some relaxing activity in another room, such as reading or knitting. **Do not lie in bed fretting about getting to sleep.** This is very important.
- Return to bed only when you feel sleepy. After you have returned to bed, if you haven't fallen asleep in 20 minutes, repeat the process as many times as necessary.
- Set your alarm for the same time every morning regardless of how much you have slept. Although it may take a number of days, this will help your body develop a consistent sleep rhythm.
- Look closely at your life and try to locate stressors that you can eliminate. Talk to a friend about these stressors and see what ideas they have about resolving them. Talking to a friend can be helpful medicine in itself for many problems.
- If you identify problems in your life which you feel unable to overcome, you may want to talk to a mental health professional. You may call Social Services (642-6074) or Counseling and Psychological Services (642-9494) for information and referrals.

If you follow some of these suggestions, you should be able to fall asleep more easily.

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The Wave

a progressive relaxation exercise for falling asleep

In this exercise you will be tensing your entire body, from your toes to your forehead, and then relaxing. This exercise will help you rid your body of tension that may be interfering with your sleep.

1. Lay in bed and begin by paying attention to your breathing. Breathe deeply and concentrate on the words, *in* and *out*. As you breathe in, say *in*; as you breathe out, say *out*. Saying these words as you breathe can help keep your mind on deep breathing. If other thoughts come into your mind, don't get upset, simply go back to the words *in* and *out*. The thoughts will pass away.
2. Imagine a warm wave touching your toes.
 - Curl your toes as hard as you can.
 - Curl the arch of your foot, keeping your toes curled.
 - Tense your ankle. *Do not relax your toes or arch, but keep adding tense body parts.*
 - Tense your calves, holding your foot tense.
 - Pull in your stomach, and hold it.
 - Pull in your diaphragm, and hold it.
 - Holding your feet, legs and torso tense, tense your back and chest and shoulders.
 - Tense your arms and make a fist.
 - Tense your neck.
 - Press your eyelids and tense your forehead, frowning as hard as you can.
 - Tense your scalp.
3. Hold the tension from head to foot for 5 seconds. Then release, allowing your body to relax, and breathe deeply.
4. Repeat *The Wave* of tension and relaxation from toe to scalp at least 3 times. If you are particularly tense and have a very hard time falling asleep, you may want to do it 6 or 7 times.
5. Each time you relax the tension, allow yourself to enjoy the fullness of your breath, riding your breath out, and just allowing the breath to flow back in. Repeat in your mind, *in* and *out*, *in* and *out*.
6. Each time you relax, feel the weight of your body on the bed, and feel each part of the body, its warmth, whether it is tingling, whether it feels light and floating or heavy and dull. Then repeat this progressive tension exercise, like a wave up the body.

This Self-Care Guide has been adapted from the Total Health Care Program's guide, parts of which were adapted from "Patient Education Aids," *Patient Care Magazine*, Aug. 15, 1980, pp 131-135.

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