



Leaflet: Insomnia - Poor Sleep

Insomnia - Poor Sleep

Insomnia means not being able to get off to sleep or waking up earlier than you feel is normal. About 1 in 5 adults do not get as much sleep as they would like.

What is a normal amount of sleep?

The normal amount sleep that people need varies from 3-10 hours a night with an average of 7-8 hours. So, for example, some people function perfectly well and are not tired during the day with just 3-4 hours sleep per night. Most people establish a pattern that is normal for them in their early adult life. A problem with sleeping may be present if one of the following occurs.

- ◆ There is a change from a persons usual pattern of sleep. (However, it is normal for people to need less sleep as they become older. Many older people feel that they do not sleep well but actually they simply need less sleep than when they were younger).
- ◆ There is some difficulty during the day due to lack of sleep. For example, tiredness, poor concentration, irritability or just not functioning well.

One or more of the following suggestions may help.

Temporary problem - poor sleep is often temporary. This may be because of stress or a difficult work or family problem. Poor sleep in these situations usually improves in time.

Body rhythms - try to get into a routine of wakefulness during the day and sleepiness at night. No matter how tired you are, do not sleep or nap during the day if there is difficulty with sleeping at night. It is best to go to bed only when sleepy-tired in the late evening. Always get up at the same time each day, 7 days a week. Use an alarm to help with this. Resist the temptation to 'lie-in'. The body becomes used to rhythms or routines. Sleep is more likely to occur if a pattern is established and kept to.

The bedroom - should not be too hot, cold or noisy. Earplugs and eyeshades may be useful if you are sleeping with a snoring or wakeful partner. Make sure the bedroom is dark with good curtains to stop early morning sunlight. Switch the light out as soon as you get into bed. Don't use the bedroom for other activities such as work, eating or television. The idea is to associate the bedroom as a quiet, relaxing place to sleep and not for other wakeful activities.

Mood - try to relax with a regular routine before going to bed. For example, a stroll followed by a warm bath, some light reading and a warm drink (without caffeine) may be relaxing in the late evening. Do not do anything that is mentally demanding within 90 minutes of going to bed. Go to bed when sleepy-tired. Some people find playing soft music from a radio or cassette helpful at bedtime. Try a player with a time switch that turns the music off after about 30 minutes. If you find you are unable to sleep after 20-30 minutes, get up and go into another room and do something else such as reading. Go back to bed when sleepy. This can be repeated as often as necessary until you are asleep.

Anxiety - some people find it difficult to switch-off their anxieties about work or home problems. Relaxation tapes are commonly available and may help with sleep (even for people who are not particularly anxious). If you find anxiety is a particular problem, discuss this with a doctor.

Stimulants - can interfere with sleep. There are three things in particular to avoid.

- ◆ Alcohol. Many people take an alcoholic drink to help sleep. Alcohol actually causes broken sleep and early morning wakefulness. Avoid alcoholic drinks for a few hours before bedtime.

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- ◆ Caffeine which is in tea, coffee and some soft drinks such as cola. It is also in some painkiller tablets and other medicines (check the ingredients on the medicine packet). Caffeine is a stimulant and may cause poor sleep. Do not have any drinks or medicines containing caffeine in the evening for several hours before bedtime. Some people have found benefit from cutting out caffeine completely through the entire day.
- ◆ Nicotine (from smoking) is a stimulant and it would help not to smoke.

Physical problems - may keep some people awake. For example, pain, breathlessness, leg cramps, indigestion, cough, itch, hot flushes, etc. Treatment of the problem may be possible.

Medication - for some conditions may interfere with sleep. For example, diuretics ('water tablets'), steroids, some antidepressants, beta-blockers and some cold remedies containing pseudoephedrine. It may be possible to amend medication with the advice of a doctor.

Strenuous exercise - near bedtime is not advisable. Mild stretching exercises may help to relax just before bedtime. However, some people find the reason they can't sleep at night is that, although the brain is tired, the body has not been tired enough during the day. If possible, try and do some exercise each day. Even a walk in the afternoon or early evening is better than nothing. Daytime exercise can help you feel more relaxed at bedtime.

Food and drink - large meals before bedtime should be avoided. A light snack or a warm (non-caffeine) drink may be useful.

Depression - poor sleep is sometimes due to depression. Tell a doctor if you feel that poor sleep is part of a depression. Other symptoms of depression may include a low mood, a poor appetite, lethargy, poor concentration, tearfulness and persistent negative thoughts. Depression is common and treatment of the depression often cures the sleeping difficulty.

What about sleeping tablets?

Sleeping tablets were often prescribed in the past. However, they have been shown to have their own problems and are now not commonly prescribed. They can cause a hang-over effect the next day. Also, 'tolerance' to sleeping tablets may develop if they are taken regularly. This means the dose needed to produce the same effect needs to be higher. Some people become dependant on sleeping tablets and withdrawal symptoms can occur if the tablets are stopped suddenly.

Sleeping tablets are almost never helpful in the long term. However, occasionally they may be advised. Sometimes a short course of sleeping tablets, or one just every now and then may be helpful. A doctor will advise on the use of sleeping tablets.

[Return to top](#)