

Getting Older, Sleeping Less?

Jane Brody, acclaimed author and columnist for the Well column in the *New York Times*, wrote recently, “Insomnia is like a thief in the night, robbing millions—especially those older than 60—of a much-needed restorative sleep.” As Shakespeare wrote in “Henry IV, Part 2”: *O sleep, O gentle sleep, Nature’s soft nurse...That thou no more will weigh my eyelids down, And sleep my senses in forgetfulness?*

Almost everyone experiences what is called “episodic insomnia,” which is defined as difficulty falling asleep, staying asleep, or waking too early. A study of adults over 65 by the National Institute on Aging found that 13 percent of men and 36 percent of women take more than 30 minutes to fall asleep. Although this study was done in 1995, the numbers are probably much larger now that many people are spending time at night looking at their laptops or other screens that can disrupt the body’s natural rhythms.



Brody quotes Dr. Alon Y. Avidan, UCLA sleep clinic director, as saying that “insomnia is a symptom, not a diagnosis” and that when it persists, should be taken seriously. When insomnia becomes chronic, lasting six months or longer, it can wreak serious physical, emotional, and work-related problems which can be catastrophic.

In addition to excessive daytime sleepiness or narcolepsy, which can be dangerous, Dr. Avidan reports that chronic insomnia “may result in disturbed intellect, impaired cognition, confusion, psychomotor retardation, or increased risk for injury. Untreated insomnia is often accompanied by depression, and may increase the risk of falls and fracture.”

There are two types of insomnia: one, known as primary insomnia, is a result of a problem that occurs only or mainly during sleep, like sleep apnea, “restless leg syndrome,” or a tendency to act out one’s dreams physically, which can be an early warning sign of Parkinson’s disease.

The second, a more common form of insomnia, may be the result of side effects of medications, or behavioral factors like ill-timed exposure to caffeine, alcohol, nicotine, or daytime naps. It might also be related to environmental factors like jet lag, excessive noise, or light—especially the blue light from an electronic device—in the bedroom.

Some of the medical conditions that can cause insomnia are heart failure, GERD, lung disease, arthritis, Alzheimer’s disease, and incontinence. Treating the underlying condition can relieve the insomnia.

The more one worries about a sleep problem, the worse it can get. Experts recommend that if you are tossing and turning for over one-half hour, getting up and doing something can help. Also, writing notes to yourself, such as a “to do” list or “don’t forget to... list” can help you get back to sleep. Keeping a notepad and a pen on your nightstand will help you to think, “OK, I’ll get to it in the morning.” However a bright light in the middle of the night can reset your biological clock; try to use a very soft light or a (non-LED) flashlight.

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Here are some recommendations for “good sleep hygiene,” from sleep specialty clinics at the Mayo Clinic and by the National Sleep Foundation:

- Limit naps to less than 30 minutes a day, preferably in the early afternoon
- Avoid stimulants and sedatives
- Avoid having meals and large amounts of liquids within two or three hours of bedtime
- Exercise daily, preferably not before bed time
- Get maximum exposure to bright light daily
- Minimize bright light and screen time at night
- Go to bed only when you feel sleepy
- Avoid alcohol and sleeping pills
- Try cognitive and behavior techniques such as meditation and guided relaxation techniques

Many people regard alcohol as a sleep aid, but in reality it produces fragmented sleep and interferes with REM sleep, according to sleep researchers. Sleeping pills can be problematic, especially for older people who are more sensitive to their side effects. If you are having trouble sleeping, first contact your primary care physician to figure out if there is an underlying medical condition. If not, ask for a referral to a sleep clinic for help with diagnosing and treating the condition.

Sources:

Jane Brody. “Getting Older, Sleeping Less” was published online in “Well,” *New York Times*, January 16, 2017. A version of this article appears in print on January 17, 2017 on page D7 of the New York edition.

National Sleep Foundation, *Insomnia*, <https://sleepfoundation.org/insomnia/content/treatment>, 2017.

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Quotable Quote

"Parenting is the hardest job you'll ever love. First and foremost, being a good parent means spending lots of time with your children. I personally hate the phrase, "Quality Time." Kids don't want Quality Time, they want Quantity Time, big, stinking, lazy, non-productive Quantity Time." —Al Franken

From Al Franken's graduation speech to Harvard Class of 2002. The full address can be viewed here: <http://news.harvard.edu/gazette/story/2002/06/class-day-address-june-5th-2002-al-franken-73/>