



When You CAN'T SLEEP

By Jane Thiel, APRN, WHNP-BC

As you toss and turn, the alarm clock ticks from 2:30 to 3 am. Your husband is snoring and even the dog is sleeping! If you can't get to sleep, you may have insomnia. Here's what you should know:

What is Insomnia?

Insomnia is the inability to fall asleep or remain asleep throughout the night. Women with insomnia do not feel refreshed upon awakening; energy levels are low, fatigue often sets in, job performance suffers, and over time can lead to major quality of life issues. Most adults need six to eight hours of sleep per night, yet it's estimated that 20 percent of all adults suffer from chronic insomnia.

What are the symptoms?

Difficulty falling asleep, awakening during the night and having trouble getting back to sleep, and/or early awakening. Individuals with insomnia suffer from fatigue, irritability, anxiety and even depression. They also have problems focusing and frequently have increased errors and accidents.

What causes insomnia?

There are many causes of insomnia, with the top three causes in women being stress, anxiety and depression. Women are twice as likely as men to develop insomnia. Prescription medications such as antidepressants, heart and blood pressure meds, allergy meds, and stimulants such as Ritalin can cause insomnia.

Over-the-counter medications such as decongestants, weight loss products and products containing caffeine can also add to sleepless nights. Caffeine, nicotine and alcohol consumed later in the day can interfere with falling asleep and remaining asleep. Swing shift workers and long distance business

travelers have interrupted circadian rhythms that can interrupt sleep. Chronic medical conditions, especially those involving pain, frequently create sleep problems. Age alone is a factor; as we get older we spend less time in the deeper levels of sleep that are more restorative. Perimenopausal women often have severe sleep issues secondary to drenching night sweats.

How is insomnia diagnosed?

If you think you have a sleep problem, see your healthcare provider. As a nurse practitioner, I always take a detailed history including sleep habits, perform a complete physical exam, and obtain a thyroid screen and other possible lab tests looking for conditions that might contribute to sleep issues. In some cases, a sleep study is performed in a laboratory or diagnostic setting with testing done for brain waves, heart rate, breathing and body movements. These studies are especially helpful in diagnosing sleep apnea and restless leg syndrome, which are conditions requiring special medications and/or medical equipment.

What are treatments for insomnia?

- Use bed for sleep and sex only.
- Maintain good sleep habits, even on weekends. Go to bed and get up around the same time.
- Don't nap.
- Avoid large meals before bedtime and do not consume caffeine, alcohol or nicotine later in the day.

- Keep bedroom cool, dark and quiet. Use "white noise" such as a fan to block out environmental/background noise. Get computers, cell phones and other electronic equipment out of the bedroom (that includes the 10-inch digital clock!).
- Practice relaxation techniques, such as biofeedback, breathing exercises, a warm bath or partner massage.
- Sometimes, medication helps when used short-term. Medications your health care provider may prescribe include Ambien (zolpidem), Lunesta (eszopiclone), Sonata (zaleplon) and Rozerem (ramelteon). Most experts advise against long-term use of sleep meds. Over-the-counter sleep aids are helpful for some women. Most of these contain diphenhydramine (ex. Benadryl), a first generation antihistamine; the main side effect being drowsiness. Combination products such as Tylenol PM or Advil PM simply add Tylenol or Advil to diphenhydramine; hence, adding some pain relief to the formulation.
- Silence the noisy bed partner. Suggesting that your snoring bed partner seek evaluation is appropriate. Frequently this very noisy condition is actually sleep apnea, a true sleep disorder that has major health ramifications.
- Perimenopausal women often benefit greatly with some form of hormone therapy. Estrogen lessens vasomotor symptoms and helps create deeper levels of sleep. Ask your health care provider for more information.

Jane B. Thiel, APRN, WHNP-BC is a nurse practitioner at Grand Rapids Women's Health and has been in practice for 33 years. She enjoys working with women of all ages and many seek her out for her experience in menopausal issues.