Mental Notes

A Newsletter about Mental Health

Sleep and Your Mental Health

By Dr. Sarah Baker

Why is Sleep so Important?

Sleep is an important part of mental and physical health. It is the time when our bodies rest and recover from stress or illness. Our brains also need sleep in order to rejuvenate, and many researchers and clinicians believe our dream sleep helps us work through emotional issues or problems.

What is Sleep, Anyway?

The <u>Canadian Oxford Dictionary</u> (2005) defines sleep as: "the naturally recurring condition of rest and inactivity ... in which consciousness, response to external stimuli, and voluntary muscular action are largely suspended."

But really, sleep is so much more than that. Humans sleep about 30% of every day, and most people need between 7½ and 9 hours of sleep per night. Sleep is made up of five stages, each of which has a distinct form of brain activity. Stage 1 sleep starts when you just begin to drift off. You might not even know that you are sleeping, and if woken up may say that you were not asleep.

From Stages 2 to 4, you shift into much deeper sleep. Lasting about 30 minutes, Stage 4 (or Delta) sleep is where you get your deep, physical rest. Then you hit REM sleep, which is where all those (sometimes strange) dreams happen. Your brain is very active, but your body is immobilized. After REM sleep, you go through the stages in reverse, working your way up to waking.

Why is it Important to Sleep Well?

There are many theories about why sleep is so important, and we are still learning about all the functions that sleep serves. What we do know is that when people are deprived sleep, they have a range of difficulties. People with insomnia (difficulties falling or staying asleep) or hypersomnia (sleeping much more than is average for most people) report problems including physical fatigue and low energy, irritability, anxiety, depressed mood, poor concentration, difficulties making decisions, and problems with memory. There is also increasing evidence that sleep problems (both too much and too little sleep) are associated with being overweight, increased risk of diabetes and heart problems. This does not necessarily mean that poor sleep causes medical conditions, but often sleep problems

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indicate physical or psychological issues that need attention.

What are the Signs of a Sleep Problem?

Problems with sleep can be the result of a sleep disorder (such as sleep apnea or restless leg syndrome), or a symptom or offshoot of some other disorder, life problem, or environmental factor. These factors could include chronic pain, anxiety, depression, life stress, shift work, or a disrupted sleeping environment. Some signs of problems with sleep are obvious, like lying bed at night for hours not falling asleep, frequently waking up during the night, sleeping excessively long hours, and difficulty getting up in the morning. Other indicators are subtler. The following signs may suggest a sleep problem, although they are not definitive:

- Not feeling rested when you get up in the morning;
- Morning headache;
- Needing a nap in the afternoon;
- Lethargy and low energy;
- Being sleepy or falling asleep during the day;
- Finding it hard to stay awake when driving, watching television, or reading;
- Others telling you that you look tired;
- Snoring or interrupted breathing when sleeping;
- Snorting or gasping during sleep;
- Irresistible urge to move your legs when in bed, and sometimes even during the day (some people

- describe this as a "creeping, crawling sensation");
- Difficulties controlling your emotions, such as irritability;
- Reduced concentration, memory, and problem-solving abilities.

What Should I do if I Think I Have a Sleep Problem?

If you suspect you may have a sleep problem, it is important to talk to your family physician about it. Do not just mask the problem by using over-the-counter sleep aides, alcohol, or other relaxants (such as prescription medication or marijuana) to help you get to sleep. While these medications or drugs can reduce insomnia, they also generally disrupt the normal stages of sleep that are so important to health. They can also increase your risk for depression and various medical conditions, and many of them can lead to the development of tolerance (needing more of the substance to get the same effect) or dependence (commonly called addiction).

Your discussion with your family physician can be more productive if you prepare some information in advance to share with him or her. On the back of this newsletter is a sleep log that you can use to track your sleep for a week or two, in advance of your doctor's appointment. You can also try the tips and strategies discussed below to improve your sleep and let your doctor know if they were helpful.

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If your sleep difficulties do not improve using strategies such as those below, there are specialists that can help. Talking with your doctor about a referral for a sleep study is a good place to start.

Improving Your Sleep Habits

- Aim to go to bed and get up at about the same time every day, even on weekends. If you have a late night, try to still get up at your regular time the next morning.
- Avoid naps. If you absolutely feel you must nap, limit yourself to 20 minutes and set an alarm. Don't nap after about 3:00 in the afternoon. The exception is that shift-workers may benefit from naps to maximize their sleep time.
- Keep your sleep environment cool, dark, and quiet. This means turning off your cell phones, tablets, computers, and television.
- Avoid doing work, talking on the phone, watching television and similar activities in bed. This prevents you from associating your bed with tasks that keep you awake and possibly stressed.
- Do not sleep anywhere except in bed.
- Try to develop a relaxing prebedtime ritual that you do every night. This could include a bath, reading, or listening to music.
- Turn off all electronic devices including your television at least 30 minutes before bedtime. The light patterns emitted by those

- devices stimulate your brain and keep you awake.
- Reduce or eliminate your caffeine use (including coffee, energy drinks, black and green tea, and chocolate), and have no caffeine after about 3:00 p.m.
- Aim to not eat or drink a lot near bedtime. A heavy meal late at night can disrupt your sleep cycle, and having too much liquid means you may wake up often to go to the bathroom.
- Do not drink alcohol near bedtime as it also interferes with your natural sleep cycle.
- If you have trouble falling asleep for more than about 30 minutes, get up out of bed and do something relaxing until you are very sleepy, then try again. The goal is to avoid you starting to associate being in bed with the stress of *not* sleeping, as this can worsen insomnia.
- Get daily exercise, which can range from a walk to a vigorous workout. Avoid exercising too close to bedtime (at least 4 hours before bedtime).
- Bedtime is not the time to talk about difficult topics with your partner, or to go over your to-do list for the next day; save such discussions for earlier in the day.
- Try to re-set your biological clock each morning by going out and getting some sun on your face for a few minutes shortly after waking. This will help even on a cloudy day!

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SLEEP DIARY

<u>SLEEP DIARY</u>							
<u>Day</u>	<u>Monday</u>	Tuesday	Wednesday	Thursday	<u>Friday</u>	Saturday	<u>Sunday</u>
Time to bed							
Time to fall asleep							
Number of wakings							
Longest waking							
Time up in the morning							
Sleep quality 1-10							
1 = very poor							
10 = very good							
If sleep quality poor,							
main reason why?							
Exercised?							
Napped?							
# Caffeinated drinks							
# Alcoholic drinks							
Average daily stress							
level 1-10							
1 = very low							
10 = very high							

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Additional Resources:

http://www.canadiansleepsociety.com/brochures.html

Hauri, P., & Linde, S. (1996). *No More Sleepless Nights: Revised Edition*. Canada: John Wiley & Sons, Inc.

Silberman, S. (2009). *The Insomnia Workbook: A comprehensive guide to getting the sleep you need.* New Harbinger Publications.

References: