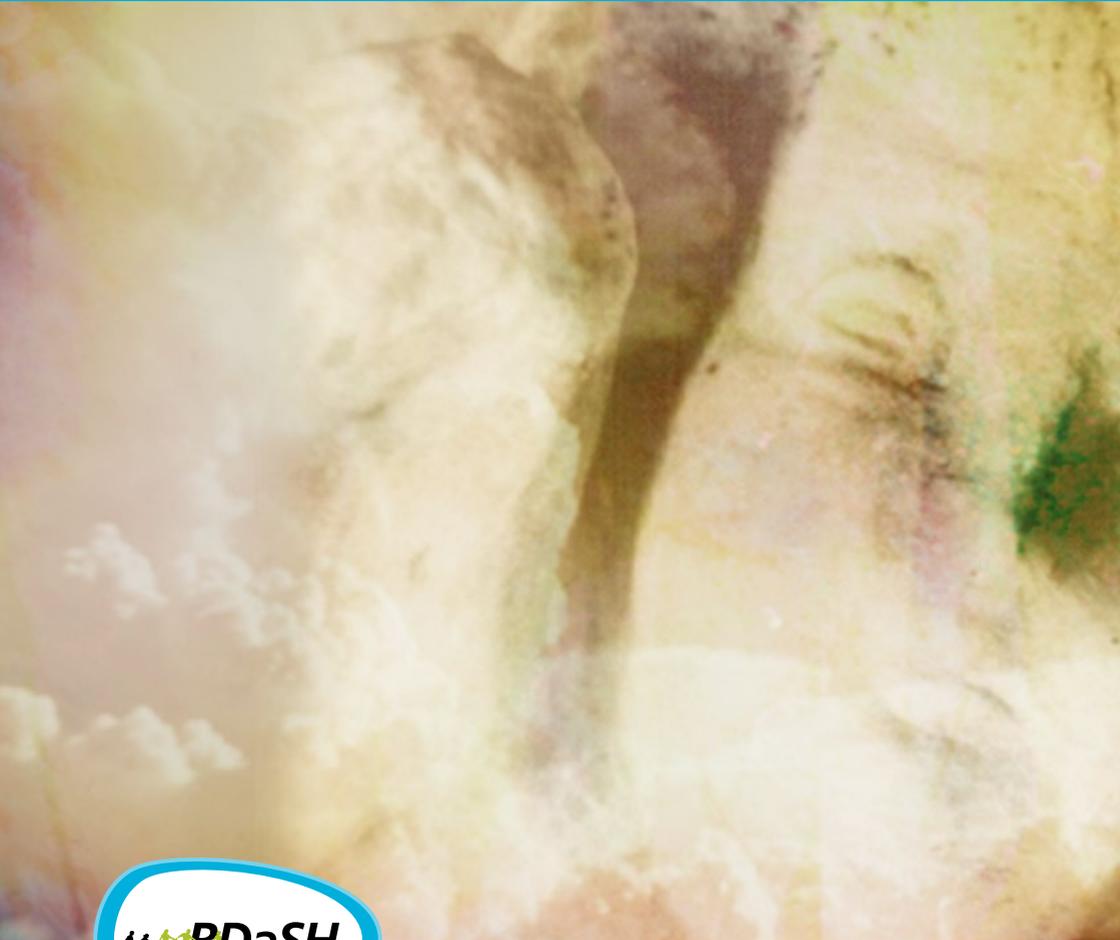


# Sleep

Information booklet



Sleep problems are often referred to as insomnia. They are very common, particularly in women, children and people over 65, so it is quite normal to have trouble sleeping at some point in your life.

People can become very distressed when they feel they are not getting a good night's sleep, and this can make it even harder to go to sleep.

This leaflet aims to help you to understand your sleep problem better and to learn some simple ways to cope.

## How much sleep do we need?

People vary greatly in their need for sleep. It is not true that we all need seven to eight hours' sleep every night; many studies have shown that people range between needing four hours and ten hours or more.

The amount of sleep a person needs varies throughout their life. A newborn baby spends between seven and 16 hours a day sleeping, but as children grow older they need less sleep. By the time someone reaches their thirties they may need less than eight hours, and this reduces as we get older, with many people in their seventies needing less than six hours' sleep.

The need for sleep also varies depending on levels of activity; less active people need less sleep, but if you are constantly on the go with perhaps a physically or mentally demanding job, or a young family, you may need more sleep.

## Different sorts of sleep

Sleep has at least five different stages, varying from light to deep sleep. It is divided into REM (rapid eye movement)

and non-REM sleep. REM sleep occurs several times during the night and is where most dreaming is thought to take place. Non-REM sleep is divided into four stages, from drowsiness to deep sleep and may change from one stage to another several times.

As with the amount of sleep we need, the sort of sleep we have changes as we get older. Sleep in older people tends to be shorter, more restless and more easily disturbed.

Our pattern of when we sleep often changes too. As we age, it becomes more likely that we drop off to sleep during the day, so our natural rhythm of sleep can be disturbed.

## Reasons for sleep problems

There are a number of reasons why sleep problems can develop. We may not be able to

do much about some of them. They include:

- Normal effects of ageing
- Medical reasons, such as needing to go to the toilet during the night and finding it hard to get back to sleep. This occurs more in later life and in pregnancy
- Pain, which can be common in older age
- Disrupted sleep routine, such as shift working.

## Things we can do to help ourselves

Other reasons for sleeplessness do have solutions. It could be that sleeping is your main problem, but there may be another problem which is causing you to have difficulty sleeping which you need to tackle. Things you could try include:

## Try not to worry about sleeping

Sometimes you are getting enough sleep, but it's just less than you expect. If you worry about not getting enough sleep, you may be expecting too much sleep and worrying about not getting enough. This makes matters worse because you feel more tense and anxious, which makes falling asleep even harder. Try to remind yourself that loss of sleep will not hurt you; lying calm and relaxed in bed can be as refreshing as sleep.

Don't keep looking to see what time it is. Try to put sleep out of your mind by telling yourself that you don't really care whether you get to sleep or not. Have a daydream about something pleasant. Sometimes people find it helpful to lie and force themselves to stay awake; if someone tries to force their eyes open, the urge to

close them and to go to sleep becomes very strong.

## Tackle worries about other problems

These might include relationship, money or work. Try writing down the problem and everything you think you might do to solve it. Choose the most helpful solution and write down all the steps you need to take. Write down any obstacles and how you might tackle them.

Then tell yourself that you can't do any more about it at this time of night and that you are not going to let yourself worry about it until the morning. Finish by spending at least half an hour winding down by reading or listening to music. When you start to feel sleepy, go back to bed. If you don't drop off to sleep within 15 to 20 minutes, don't stay in bed.

## Progressive relaxation

Progressive relaxation helps lower anxiety, relieves muscle tension and can help with sleep. You can buy a variety of CDs, or there may be some available free of charge at your local GP surgery or library. Alternatively you could try the following web page <http://www.howdidiyou.sleep.org/improve-your-sleep/>

## Check your medication

Some drugs, such as some taken for asthma and migraine, can affect sleep because they are stimulants, so check with your pharmacist or doctor. Sleeping tablets can help in the short term. However if they are taken for a long time they may cause sleep problems, because they can interfere with quality of sleep and can alter sleep patterns.

## Look after your emotional wellbeing

Anxiety, depression or stress may keep you awake. It is quite common to wake up early in the morning and find it hard to get back to sleep, or to have difficulty getting off to sleep in the first place.

It is very common to have disturbed sleep following bereavement, but your sleep pattern should return to normal in time. Talking to a friend or to your GP may help.

RDaSH has produced leaflets about stress, anxiety, depression and coping with bereavement which you may find useful. Consider seeking professional help if the symptoms are prolonged or severe.

## Make your surroundings comfortable

Check that your bedroom is not too noisy or too quiet, too light or too dark, too hot or too cold and that the bed is comfortable. Make sure that the temperature of the room suits you and that your partner is not keeping you awake, by snoring for example.

## Avoid caffeine, cigarettes and alcohol

Avoid things containing caffeine, such as coffee, tea, hot chocolate and cola within four hours of going to bed, as these will reduce your quality of sleep. If you have a bedtime drink, try to make sure it is decaffeinated.

Nicotine is a stimulant, so smoking last thing at night can keep you awake. Stop smoking aids such as patches and chewing gum can also affect sleep. If you do smoke, try to have your last cigarette at least four hours before bedtime.

Some people feel sleepy after drinking a lot of alcohol, but alcohol affects quality of sleep. Avoid drinking large amounts of alcohol close to bedtime.

## Eat good sleep foods

Eat food such as turkey and dairy products which are high in tryptophan, an amino acid that the body uses to produce sleep hormones such as serotonin and melatonin.

## Be consistent

Let your body know where it is by sticking to a regular timetable. Go to bed and get up at roughly the same time, rather than try to catch up on lost sleep by going to bed early or napping during the day. Try to keep weekend lie-ins to no more than an extra hour.

## Wind down before bed

Use the hour before going to bed to unwind and prepare for sleep.

## Be more active

Increase your daytime activity and exercise, but don't exercise too near bedtime.

## Associate your bed with sleep

Don't watch TV, eat and talk on the phone in bed. However, making love can help you to get to sleep.

## Useful websites:

- [www.bemindful.co.uk](http://www.bemindful.co.uk) information about mindfulness
- [www.mentalhealth.org.uk](http://www.mentalhealth.org.uk) for wellbeing podcasts downloadable to mp3 players or to burn onto a CD
- [www.soundshealthy.nhs.uk](http://www.soundshealthy.nhs.uk) for relaxation downloads
- [www.eastlancshealthyminds.nhs.uk/resources/info.asp?id+14](http://www.eastlancshealthyminds.nhs.uk/resources/info.asp?id+14) for free relaxation guide
- [www.mind.org.uk/foodandmood](http://www.mind.org.uk/foodandmood) for information about food and its impact on mood
- [www.bbc.co.uk/health/](http://www.bbc.co.uk/health/) healthy minds website – useful information on all aspects of mental health.

If you would like this in large print, braille or on audiotape or would like this document in an alternative language, please contact the Patient Advice and Liaison Service on 0800 015 4334.

**Amharic**

ይልገን ጸዕዳ፡ በግልጽ እንዲታይዎ በትልቁ፣ በብሬል ተጽፎ ወይም በቲፕ ተቀርቶ ወይም በሌላ ጽንፁ ተጽፎ ለጥቅ የሚፈልጉ ከዋነኑ የሰነድ ምክርና ግንኙነት ለገልግሎትዎ በቤታ ቁጥር 0800 015 4334 አወሰዱ ያንጋግሩ።

**Arabic**

إذا أردت الحصول على هذه الوثيقة بالحظ الكبير أو بلغة برايل أو على هيئة شريط صوتي أو مترجمة إلى لغة بديلة فيرجى الاتصال بخدمة التنسيق ونصحة المريض Patient Advice and Liaison Service على رقم الهاتف 0800 015 4334 .

**Bengali**

আপনি যদি এটা বড় অক্ষরের ছাপায়, ব্রেইল-এ, বা কানে শোনার টেইপ-এ পেতে চান অথবা আপনি যদি এই কাগজটা অন্য কোন ভাষায় পেতে চান, তাহলে দয়া করে 0800 015 4334 নম্বরে পেশেন্ট এ্যাড্‌ভাইস এন্ড লিয়েজন্ সার্ভিসের সাথে যোগাযোগ করবেন।

**Cantonese (traditional Chinese)**

如果你希望本文件是采用大字印刷、盲文或录音磁带等格式，或者希望本文件是使用其它的语言，请联络病患建议与联络服务 (Patient Advice and Liaison Service)。电话号码：0800 015 4334。

**Czech**

Pokud byste chtěli dokument psaný většími písmeny, brailovým písmem nebo na zvukové kazetě nebo v jiném jazyku, prosím, kontaktujte poradenskou službu pacientům na tel. 0800 015 4334.

**Farsi**

در صورت تمایل به داشتن این سند به نسخه ای با چاپ درشت تر، به خط بریل یا نسخه صوتی، یا به زبان دیگری، لطفاً با دفتر خدمات مشاوره و هماهنگی بیماران به شماره تلفن ۰۸۰۰۰۱۵۴۳۳۴ تماس حاصل نمایید.

**French**

Si vous désirez ce document en gros caractères, en braille, enregistré sur cassette audio ou dans une autre langue, veuillez contacter le service de conseils et liaison des patients [Patients Advice and Liaison Service] au 0800 015 4334.

**Kurdish Sorani**

ئەگەر تۆم زانیاریتە بە چۆنی گۆرەر، برائیل یان لەسەر شریتی دەنگی دەخوازیت باخود تۆم بەلگەنەلمیە بە زمانیکی دیکە دەخوازیت، تکلیه پەمووندی بکه بە خۆمانگۆزاری رێنمایی و هاوناھەنگی ئەمووناسۆ بە ژماره 0800 015 4334.

**Polish**

Jeżeli dokument wymagany jest w wersji drukowanej dużą czcionką lub alfabetem Braille'a, na kasecie audio lub w innym języku, prosimy o kontakt z zespołem ds. kontaktów z pacjentami (Patient Advice and Liaison Service) pod numerem telefonu 0800 015 4334.

**Punjabi**

ਜੇ ਤੁਸੀਂ ਇਸ ਨੂੰ ਵੱਡੀ ਛਪਾਈ, ਬ੍ਰੇਲ ਨਾ ਸੁਣਨ ਵਾਲੀ ਟੇਪ ਤੇ ਚੱਟੋਟੇ ਹੋ ਜਾਂ ਇਸ ਸਮਝਣ ਨੂੰ ਹੋਰ ਭਾਸ਼ਾ ਵਿੱਚ ਚੱਟੋਟੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਮਨੀਅਰ ਸਲਾਹ ਅਤੇ ਕਾਲ-ਸੇਵਾ ਸੇਵਾ (Patient Advice and Liaison Service) ਨਾਲ 0800 015 4334 ਤੇ ਸੰਪਰਕ ਕਰੋ।

**Somali**

Haddii aad jeclaan lahayd in aad kan ku hesho far waaweyn, farta braille ee dadka indhaha la' ama cajalad dhegeysi ah ama haddii aad jeclaan lahayd in aad dukumeentigan ku hesho luqad kale, fadlan Adeegga Taalobixinta iyo Xiriirinta ee Bukaanleyda (Patient Advice and Liaison Service) kala soo xiriir lambarka 0800 015 4334.

**Turkish**

Bu belgeyi büyük yazı, braille (kör alfabesi) veya ses kaydı olarak veya başka bir dilde almak istiyorsanız, lütfen 0800 015 4334 no.lu telefondan Hasta Danışmanlık ve İrtibat Hizmetleri ile bağlantıya geçiniz.

**Urdu**

اگر آپ یہ بڑی چھپائی، بریل میں یا صوتی ٹیپ پر حاصل کرنا چاہتے ہیں یا یہ دستاویز کسی قابل زبان میں چاہیں تو براے کرم پیشیت ایڈوائس اینڈ لیزن سروس سے رابطہ کریں۔ 0800 015 4334 پر رابطہ کریں۔

**Vietnamese**

Nếu muốn có tài liệu này dưới dạng in chữ cỡ lớn hơn, chữ nổi braille hay bằng ghi âm, hoặc bằng một ngôn ngữ khác, xin quý vị liên hệ bộ phận Dịch vụ Tư vấn và Liên lạc với Bệnh nhân theo số 0800 015 4334.

This information is correct at the time of publishing  
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