INSOMNIA



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Insomnia-related sleepiness can affect work, school and social performance, and increase the risk of accidents.

WHAT IS INSOMNIA?

Insomnia is a sleep disorder characterised by insufficient sleep, which negatively affects your ability to function properly in the daytime. You have difficulty falling or staying asleep, or both – even if you have enough time and a suitable environment for sleep. Up to two-thirds of us occasionally experience sleeplessness, which may qualify as insomnia, depending on how long symptoms persist and whether they interfere with daytime functioning. The average amount of sleep humans need is 7-8 hours a night, but some "short sleepers" manage well on less. Insomnia may be acute (short-term) or chronic (long-term):

- Acute insomnia lasts for days or weeks, but not longer than three months.
- Chronic insomnia is experienced at least three days a
 week for over three months. Around 10-15% of people
 have chronic insomnia. Symptoms are usually severe
 enough to affect work or school performance and social or
 family life, and typically cause distress.

Sound sleep is as vital to health as a nutritious diet and regular exercise. Unmanaged long-term insomnia, which can lead to chronic sleep deprivation, is associated with lower quality of life and higher risk of conditions such as substance abuse, chronic pain, heart disease and diabetes.

WHAT IS INSOMNIA?

Common symptoms include:

Difficulty falling asleep

- Difficulty staying asleep
- Unwanted early waking
- Resisting sleeping at bedtime in children and teens
- Feeling fatigued during waking hours, which may lead to poor concentration, focus and memory, low mood and trouble communicating.
- Daytime irritability, hyperactivity or aggressiveness as a result of poor sleep, especially in children.



INSOMNIA CAUSES AND RISK FACTORS

Many possible factors may contribute to insomnia. While almost everyone occasionally has a sleepless night, the following increase your risk for developing insomnia:

- Other medical conditions e.g. diabetes, chronic pain. Certain medications may also negatively impact sleep.
- Other sleep disorders. restless legs syndrome (an uncomfortable urge to move your legs when trying to fall asleep) or sleep apnea (causes your breathing to pause at times during the night, disrupting sleep)
- Circadian rhythm disorders. The body's "internal clock," which controls your sleep-wake cycle, can become disrupted by irregular work or travel schedules. Examples are jet lag from crossing multiple time zones, or changing day and night shifts often.
- Some types of physiological arousal disrupt normal sleep patterns, such as heightened heart rate, higher body temperature and increased levels of certain hormones, like cortisol.
- Psychiatric disorders such as anxiety and depression.
- **Stress**. Worrying about issues such as health, money or family can keep your mind active at night. Stressful life events e.g. a relationship ending or a job loss, may also cause insomnia.
- **Poor sleep habits and environment**. watching movies in bed; keeping bedroom lights on throughout the night.
- **Being female**. Hormonal changes during the menstrual cycle and menopause may contribute to insomnia. Menopausal night sweats and hot flushes often disrupt sleep. Insomnia is also common during pregnancy.
- **Being over 60**. With age, changes in sleep patterns and health make insomnia more likely.
- Having an immediate family member with insomnia.



MANAGING INSOMNIA AT HOME

Insomnia can often be resolved with lifestyle changes and home treatment. Practise healthy sleep habits as follows:

- **Follow a sleep schedule**, with the same bedtime and wake time every day, including weekends.
- Reserve your bed for sleep only (and sexual activity).
- Avoid or reduce caffeine, alcohol and nicotine, especially near bedtime.
- Maintain a healthy sleep environment. Keep your bedroom dark, quiet and at a comfortable temperature. Limit screen time before bed.
- Avoid large meals and high fluid intake close to bedtime.
- **Get regular exercise**, but schedule it at least a few hours before bedtime.
- **Limit napping** to encourage night-time sleep. If you must nap, don't nap longer than 30 minutes or after 3 p.m.
- Manage stress and anxiety. Put your worries (including sleep-related anxiety) aside at bedtime. Develop a relaxing ritual to prepare for sleep, such as taking a bath, reading, listening to soothing music, doing breathing exercises or meditation.
- **Don't try too hard to sleep**. If you're lying awake fretting, rather get up and do a relaxing activity in another room until you feel sleepy, then go back to bed.

TREATING INSOMNIA

Treatment depends on how long you've been experiencing sleep issues and factors that could be contributing to sleep loss. If your insomnia is caused by another condition, such as sleep apnea or depression, treating this often improves sleep.

With short-term insomnia, your doctor will likely recommend ways to improve your sleep hygiene i.e. changing sleep habits and environment. (See: "Managing insomnia at home"). Temporary use of prescription sleep medication may be appropriate if the insomnia is causing distress. For more persistent, chronic insomnia with no obvious cause, treatment options include:

Cognitive Behavioral Therapy (CBT). The "cognitive" part of CBT helps you gain better control of negative thoughts and worries that keep you awake. The "behavioural" aspect involves practising good sleep habits. Your therapist will also teach you strategies specifically aimed at insomnia, such as progressive muscle relaxation, biofeedback and breathing exercises, to lower anxiety at bedtime.

Medication may be appropriate when insomnia causes significant symptoms, or CBT is not helping. Prescription sleeping pills can be very helpful for treating insomnia, but they should be used with caution as they can have side effects, such as daytime grogginess, and may be habit-forming. Generally, doctors recommend using the lowest effective dose, and only taking the medication for a week or two at a time.

Tell your doctor before trying non-prescription products that claim to improve sleep. Some of these products can be harmful, or interact with other medicines you may be taking. Non-prescription sleeping pills contain antihistamines that can make you sleepy, but may cause side effects e.g daytime sleepiness, dizziness, confusion and difficulty urinating. They can also be habit-forming.



MEDICAL REFERENCES

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