

Sleep Problems

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Sleep problems are very common in older people. Many older people use prescription or over-the-counter sleeping medications. When used too frequently or inappropriately, these medications may be a risk to your health and safety.

Q . How much sleep do we need, and why is sleep so important?

A . Sleep is a necessary part of our lives, and most people will spend about one-third of their lives sleeping. The average person needs about 8 hours of sleep per night. However, some people need a lot more and others need a lot less. The amount of sleep you need is that amount which allows you to feel refreshed and to function at your best the following day.

Q . Does sleep change as people get older?

A . In surveys, healthy older people report that they sleep less at night, they wake up more often during the night, they are more sleepy during the daytime and they nap more during the day. Research has also found changes in the structure of sleep in older people. These changes include more time spent in the lighter stages of sleep, and less time spent in the deeper stages of sleep. In addition, more time is spent in bed awake. Older people may also have a change in the biological clock that regulates daytime wakefulness and nighttime sleep. For example, it is very common for an older person to feel sleepy earlier in the evening, and wake up earlier in the morning.

Q . Are there simple things I can do to improve my sleeping?

A . Many people have problems with sleep that can improve with simple changes in sleep habits, also known as sleep hygiene. During the daytime, get physical exercise (but don't exercise right before bedtime) and sunlight exposure (especially if you have a problem with an advanced sleep phase). Decrease or eliminate daytime napping. Avoid alcohol and caffeine, especially late in the day. Nicotine (cigarettes and patches) also disturbs sleep. Wind down and relax prior to bedtime, follow a regular bedtime routine (such as cleaning up and putting on comfortable bedclothes). Don't use bedtime as "worry time". Relaxation techniques may be helpful. If you have trouble falling asleep, try getting out of bed for a while, and don't return to bed until you feel sleepy again. If you wake up during the night, don't look at the clock, but rather, try to fall right back to sleep. If you do get out of bed during the night, limit yourself to peaceful activities. Spending too much time lying in bed awake can actually lead to more problems with your sleep. Finally, try to set a regular time to get up every morning of the week, including weekends.

Q . How do I know if I have a serious problem with my sleep?

A . Insomnia (difficulty getting to sleep or staying asleep) that lasts for only a few days is often caused by a recent good or bad stress, and generally gets better on its own. A long-standing problem with insomnia (in other words, chronic insomnia) that occurs on most nights and lasts a month or more is severe. It usually results from many reasons and often needs help

from your healthcare provider. Depression is a common cause of chronic insomnia. In addition, many medical illnesses can cause chronic insomnia, including stomach problems, heart and lung diseases, conditions that increase nighttime urination, pain from arthritis, Parkinson's disease, thyroid disease and many other conditions. People with dementia, such as Alzheimer's disease, can also have problems sleeping at night. Many medications can interfere with sleep, such as some blood pressure and asthma medications, and over-the-counter products such as alcohol, decongestants, and caffeine. During menopause, women may have insomnia and daytime sleepiness. In addition, some important sleep diseases are more common as people get older. Sleep apnea is a serious condition in which someone temporarily stops breathing while asleep. It occurs more often in overweight men. Common symptoms include severe daytime sleepiness and snoring. Periodic limb movement disorder is a condition where the person has twitching or jerking movements in their legs which momentarily wake them up, and can cause them to be sleepy during the day because they don't get restful sleep at night. Both these conditions can cause insomnia and/or severe daytime sleepiness.

Q . What about sleeping pills?

A . Sleeping pills should only be used when prescribed by your doctor. These medicines are recommended to be used at a low dose and only short-term (not longer than 2 to 3 weeks). In chronic insomnia, sleeping pills should be used only once every 2 to 3 nights, and only after a careful evaluation by your doctor. Sleeping pills should not be taken with alcohol. They should also be avoided if they cause severe sleepiness during the daytime or if you have sleep apnea. Many over-the-counter sleeping pills contain antihistamines (such as diphenhydramine), which can make you sleepy. Antihistamines are not recommended in older people because they can interact with other medications and can cause many unwanted side effects in older people, including dry eyes, dry mouth, constipation, trouble with urination and confusion. Melatonin is a hormone in the brain that is available in tablet form and may be helpful for problems with the sleep/wake cycle and jet lag. Unfortunately, melatonin preparations are not tested or regulated by the government. Some older people report sleeping better when they take a pain medication such as acetaminophen prior to bedtime. However, you should be cautious with some over-the-counter preparations of acetaminophen that are marketed as a sleeping aid and contain an antihistamine, because of the possible problems with antihistamines mentioned above.

Q . How can I get more information on sleeping problems in older people?

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