



# INSOMNIA

## HAVE YOU REALLY GOT

Do you dread going to bed for fear of not sleeping? Do you wake in  
Here's how to tell if you're an insomniac (or just sleeping badly) and

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**G**iven the hurly-burly of 21st-century living, many experts believe it's not surprising that an increasing number of people have trouble relaxing and falling asleep. 'For me, it's very hard to understand how people switch off their thoughts and become unconscious,' says Lydia, 32. 'It's not specific worries, I just can't seem to clear my mind.' As many as one in four people have insomnia which, if left untreated, can have devastating consequences.

Insomnia is either a difficulty in getting to sleep or staying asleep for an acceptable period or having disturbed sleep patterns (including waking in the middle of the night or too early in the morning), resulting in insufficient sleep. To be classified as an insomniac your sleep patterns must be disrupted at least three times each week for more than a month, causing you distress and preventing you from functioning properly during the day. 'Sometimes, after a few bad

later on be able to fall asleep but have a problem staying asleep – or have a combination of both sleeping difficulties.'

## HOW MUCH SLEEP DO YOU NEED?

'This may come as a surprise,' says Neil Stanley, Director Of Sleep Laboratories at the University Of Surrey and Chairman of The British Sleep Society, 'but the norm is between three and 11 hours per night, not eight hours. Sleeping provides an opportunity for your body to repair itself and the amount of sleep you need varies from person to person. We tend to need less sleep as we get older but the key is to feel refreshed the next day. If you only have five hours' sleep but feel refreshed and able to function when you wake up, then five hours is enough for you.'

Stanley also believes that sleeping in at the weekend to make up for lost sleep during the week is not a good idea. 'It's the worst thing you can do,' he says, 'because your body likes a regular sleep cycle. If you sleep for longer, you're also likely to have more deep sleep and if you wake during this type of sleep you may feel groggy. There's also some evidence to show that longer sleeping hours can induce headaches.'

## WHAT CAUSES INSOMNIA?

'Insomnia may be a symptom of another disease or a disease in itself,' says Dr Raymond Cluydts, Research Director at The Sleep-Wake Disorders Centre at the University Hospital Antwerp in Belgium. 'In just under half of all cases,' he says, 'the underlying cause is psychiatric (most patients with depression have insomnia as a symptom). In 20 to 25 per cent, insomnia results from organic disorders such as 'restless leg syndrome' (restlessness that occurs in your legs after going to bed) or different types of pain and medications that interfere with the sleep process. Circadian-rhythm disorders, in which sleep time may have become advanced or delayed due to a neurophysiological dysfunction or external factors such as jet lag or shift work, account for 10 to 15 per cent of cases. Primary insomnia, in which no identifiable cause for insomnia can be found, occurs in up to 30 per cent of all cases of chronic insomnia.'

Other things that can disrupt your sleep include external factors such as noise or an uncomfortable bed, taking stimulant drugs, foods or drink (including coffee) before bedtime and getting too much sleep during the day. 'Unfortunately, a lot of people don't wind down before they go to bed,' says Stanley. 'It's important to relax your brain before going to bed, which can be done in a variety of ways, such as having a hot bath or a warm drink, reading, listening to soft music or using aromatherapy. Some people are so hot-wired that they find it hard to relax and in a very small minority of cases, this may be due to a

hyper-arousal condition which is associated with a problem with part of the brain's arousal centre and can't be treated. But this is very rare and most people can usually find something that helps them relax.'

If you have done everything you can to relax and make your bedroom conducive to sleep (see *Is insomnia bad for you?* below) but still can't sleep, then you need to take a long, hard look at what's going on in your life and try to eliminate any problems and anxieties. 'I tried everything under the sun but nothing seemed to help me drift off at



nights' sleep,' says Lydia, 'I find myself daydreaming at work and it's not until my telephone rings that I realise I've drifted off.'

Insomnia doesn't necessarily occur every night but usually three or four times per week, for months, years or even indefinitely if not treated and the pattern of insomnia may change over time. 'An insomniac may have trouble getting to sleep for a few months,' says Dr Göran Hajak, a consultant psychiatrist and Head of the Sleep Disorder And Research Centre in Göttingen, Germany, 'and then



night,' says Sally, 35. 'After months of not sleeping, I began to analyse my life and decided that I was unfulfilled at work. Once I changed this, as if by magic, my sleeping patterns returned to normal.'

## IS INSOMNIA BAD FOR YOU?

Too little sleep makes most people feel drowsy and irritable and stops us from performing our daily activities to the best of our ability. It also leads to clumsiness which can cause accidents – studies show that patients with insomnia are four times more likely to have an accident than those without a sleep disorder.

Many insomniacs develop other diseases such as depression and anxiety. Tefvik Ustün, Professor Of Psychiatry and Principal Investigator for the World Health Organisation (WHO), says that 'at least one

quarter of insomniacs are at risk of developing further conditions such as depression, which in turn can increase the likelihood of other disorders such as heart disease.'

Experts agree that the first step to managing insomnia should be to optimise your 'sleep hygiene'. Make sure your bed is comfortable and big enough and that your curtains shut out the light. Don't drink coffee or have an argument last thing at night if possible. And start to wind down at least 90 minutes before bedtime (yoga or meditation may help). 'Count sheep or subtract numbers if it helps,' says Stanley. Go to bed and get up at a regular time. Avoid exercising late in the evening because it can stimulate your cardiovascular and nervous systems.

If, after three months, you still can't get to sleep, then it's time to visit your GP. If intrusive thoughts and worry deprive you of sleep, you could

try cognitive behavioural therapy (CBT). CBT identifies negative and faulty beliefs about sleep and corrects them by discussion with a therapist. 'Once you have optimised your sleep hygiene,' says Dr Laurence Knott, a GP with a special interest in sleep, 'CBT is a good step to take before trying a hypnotic drug.'

## IS MEDICATION THE ANSWER?

'Advances in medication,' says Dr Thomas Roth, Director Of Research at the Sleep Disorders Research Center in Detroit, US, 'can help to free patients from the fear of dependence and the next-day hangover effects associated with older medications.' The newer hypnotics are more selective in their mode of action, take effect more quickly and act for a shorter period of time. This means that they won't make you feel drowsy the next day. While other sleeping tablets have to be taken daily, Sonata, one of the new sleeping tablets, needs only be taken if and when you have a problem sleeping – so you can take it on waking in the middle of the night. 'The majority of patients won't need to take Sonata daily,' says Dr Hajak, 'and so there is virtually no risk of becoming dependant on the drug.'

Herbal remedies are another option but 'patients should start by trying one of the newer hypnotics,' says Dr Knott. 'If they're unwilling to take a prescribed medication they could try Nytol Herbal (£4.49, from pharmacies), which contains extracts of lettuce leaf and passion flower.' But while these remedies may work for some people, they may *not* work for others.

For those who have tried all the options and still can't sleep, referral to a sleep clinic may be appropriate. Patients stay overnight under controlled conditions so that experts can rule out any factors that may be stopping them from sleeping. 'It is very rare to find people with permanent insomnia where no cause or cure can be found for their sleeplessness,' says Stanley. 'In such cases, there is probably a malfunction in the brain's arousal centre and the best way to tackle that is to help them stay awake during the day. Some new drugs that help to keep you awake are on the horizon, which should help. At the end of the day, there are lots of things that insomniacs can do to help them get a good night's sleep, it's just a question of trying the options.' ■

● The Sleep Assessment And Advisory Service runs a sleep-management programme. An initial consultation costs £40. For more information, call 02892 622266 or visit [www.neuronic.com/sleep.htm](http://www.neuronic.com/sleep.htm)

## ARE YOU AN INSOMNIAC?

If your answer to any of the following is 'yes', then it's time to improve your sleep:

Do you have difficulty getting to sleep more than three times a week?

Do you have difficulty staying asleep more than three times a week?

Do you wake in the middle of the night several times a week?

Do you wake up early in the morning several times a week and feel

groggy the next day?

Do you feel tired (without cause) or run down during the day?