Hunger and copious meals can disrupt sleep. Avoid lying down until two hours have passed after dinner. If you're used to it, eat something light before bedtime (e.g. cookies, milk or cheese), don't drink chocolate, large amounts of sugar, and excess liquids. If you wake up in the middle of the night, you don't eat anything or you could start waking up regularly at the same time feeling hungry.

For older people, also consider:

- Limit fluid intake in the afternoon, especially if urinary frequency is a problem.
- Spend time outdoors and enjoy the sunlight.
- ✤ Walk and exercise as much as abilities allow, but not close to bedtime.
- Consider the effects certain medications can have on sleep. Laying stimulants and sedatives during the day can unfavorably affect your children.

For questions or concerns, discuss it with your doctor.

Educational Links (English):

- http://www.everydayhealth.com/insomnia/guide/treatment/
- http://www.rcpsych.ac.uk/mentalhealthinformation/mentalhealthp roblems/sleepproblems/sleepingwell.aspx
- http://www.rcpsych.ac.uk/healthadvice/problemsdisorders/sleepa ndtirednesskeyfacts.aspx
- http://www.rcpsych.ac.uk/healthadvice/parentsandyouthinfo/pare ntscarers/sleepproblems.aspx
- https://sleepfoundation.org/ask-the-expert/sleep-hygiene
- https://www.sleepassociation.org/patients-generalpublic/insomnia/sleep-hygiene-tips/



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Educational Booklet: Insomnia & Sleep Hygiene

Insomnia can be defined as a persistent disorder that can make it difficult to fall asleep, difficult to maintain sleep, or both, even though sleep is adequate. Insomnia can be a primary problem, or it may be secondary to other causes, such as illness or medications.

The most common signs seen in people with insomnia include: last more than 30 minutes to fall asleep, stay asleep less than six hours, wake up more than three times during the night, or have poor sleep quality.

Insomnia is most prevalent in women, middle-aged or older adults, employees who work nights, and patients with medical and psychiatric illnesses.

What are the symptoms?

- Difficulty falling asleep at night
- ✤ Waking up at night
- Waking up too early
- Not feeling rested after a night's sleep
- Tiredness during the day or drowsiness
- Irritability, depression or anxiety
- Difficulty paying attention, focusing on tasks or remembering
- Increased errors or accidents
- Tension headaches
- Anguish in the stomach and intestines (gastrointestinal tract)
- ✤ Ongoing concerns about sleep





What are the causes?

- Stress
- Anxiety
- Depression
- Changes in the environment or working hours
- Pain
- Hormonal change
- Medications that can interfere with sleep
- Psychoactive substances
- Mental disorders
- Circadian rhythm disturbances
- Lack of sleep hygiene
- Eat a lot and too late at night

When to see a doctor?

If insomnia makes it difficult to function during the day, consult your doctor to determine what might be causing your problem and how it can be treated. A sleep pattern evaluation may be required at a specialized center.

How is Insomnia treated?

If insomnia is due to certain medical, neurological, or sleep disorder conditions, it is necessary to treat that condition and in many circumstances, it is necessary to use some hypnotic medication for its management.

Moreover, there are non-pharmacological treatments such as cognitive behavioral therapy, which should be the first line of treatment before the use of medications. This includes education on sleep hygiene, relaxation therapy, stimulus control therapy, and sleep restriction therapy.

- Benzodiazepines type hypnotics: These drugs work in inducing sleep. Some of these include: Temazepam (Restoril), Flurazepam (Dalmane), Estazolam (Prosom).
- Hypnotics Type Non-Benzodiazepines: These drugs work in inducing sleep, but by a different mechanism of action. Some of these include: Zolpidem (Ambien), Hydroxyzine (Vistaril), Diphenhydramine (Benadryl), Eszopiclone (Lunesta), Doxylamine

(Unisom), Ramelteon (Rozerem), Zaleplon (Sonata), Suvorexant (Belsomra).

✤ Hypnotics Type Antidepressants: These medications are antidepressants that have marked sedative effect and are sometimes used dually to treat both depression and insomnia. Some of these include: Mirtazapine (Remeron), Trazodone (Desyrell)

Methods for achieving good sleep hygiene:

With sleep hygiene it is intended to create better sleep habits and break with the belief that "these factors neither affect me nor are important."

Sleep Hygiene Measures:

- Maintain a fixed bedtime and wake up schedule, including weekends and holidays.
- Stay in bed long enough, adapting it to the real needs of sleep. Reducing bedtime improves sleep and on the contrary, staying in bed for a long time can produce a fragmented and light sleep.
- Avoid prolonged feelings during the day. In specific cases a nap can be allowed after eating, lasting no more than 30 minutes.
- Avoid caffeine-containing beverages such as coffee, tea and soft drinks. Taking them during the afternoon or around your dream time alters the sleep pattern even in people who don't perceive it.
- Alcohol and tobacco, in addition to harming health, harm sleep and, in this sense, it should be avoided for several hours before bedtime.
- Exercise regularly, for at least one hour a day, in sunlight, preferably in the afternoon, but always at least 3 hours before going to sleep. Very close to the time of sleep can affect you because it is very activated by exercise.
- To the extent possible, keep the bedroom at a pleasant temperature and with minimum levels of light and noise.
- Avoid intense exercise or use the computer or electronic devices in the two hours before the night's sleep. Avoid constant use of the cell phone while in bed as its lighting can alter the circadian cycle.
- Avoid doing in bed activities such as: watching TV, reading, listening to radio, using the cell phone, etc. The bed must be for sleeping or sex only. In this way the body gets used to the bed being our resting place.