Insomnia in Older Adults

What is insomnia?

Having insomnia means you often have trouble falling or staying asleep. It may be hard for you to go back to sleep if you wake up in the middle of the night. It may be a problem for just a short while or for a long time.

Insomnia affects 1 in 3 adults every year in the US. It is more often a problem for older adults than younger adults. Many older adults have some trouble going to sleep or staying asleep. Older adults are also more likely to have other sleep problems such as restless legs syndrome or sleep apnea.

As you get older, you may find that you spend more time in bed but the same or less time asleep. You may tend to go to sleep earlier in the evening and wake up earlier in the morning. You may wake up more often during the night. When you are sleeping, you may not have as much deep and refreshing sleep as you used to.

How does insomnia occur?

Problems with sleep may be just the result of getting older or having poor sleeping habits. Examples of poor sleep habits are long daytime naps, trying to sleep in noisy surroundings, or eating or working in bed before sleeping. A change in work hours or travel can also affect your sleep patterns.

Sometimes trouble sleeping can result from:

- Use of caffeine or other stimulants
- Use of alcohol, other depressants, or sedatives, which can relax you but lead to shallow, interrupted sleep, especially if used for a long time
- · Stress—for example, when you are in the hospital or have a sick relative
- Depression, anxiety, or other emotional problems.

Chronic illness, pain, or other problems can cause insomnia. For example:

- You may have to get up more often in the night to urinate if you have diabetes, prostate enlargement, loss of bladder control, or urination problems caused by drugs you are taking.
- You may wake up often if you have heart failure or a chronic lung disease because you are not getting enough oxygen when you breathe.
- The joint pain and stiffness of arthritis may make it hard to sleep.
- · Alzheimer's disease may cause you to wake up more often and to have less total sleep time.
- · If you are very overweight, you are more likely to have sleeping problems.
- Restless legs syndrome is aching, twitching, tingling, burning, or prickling feelings in the lower leg muscles when you lie in bed. It can make it hard to fall and stay asleep. A related problem is called periodic movements in sleep, which is powerful flexing of the lower leg muscles many times throughout the night, which may also keep you awake.

• If you have sleep apnea, your breathing stops many times while you sleep. This may happen when your throat muscles relax and your airway gets blocked. The lack of oxygen can wake you up. Loud snoring and snorting when you wake up are signs of sleep apnea. If your bedroom partner says that you stop breathing, then snort and wake up or turn over often in your sleep, ask your healthcare provider about sleep apnea.

Some medicines can interfere with sleep. Ask your healthcare provider whether any of your medicines may cause problems with sleep.

What are the symptoms?

Symptoms include:

- · Trouble falling asleep
- · Waking up often in the night
- · Waking up early in the morning and not being able to go back to sleep
- · Not feeling rested in the morning or feeling tired during the day
- · Restlessness or anxiety as it gets close to bedtime.

How is it diagnosed?

Your healthcare provider will ask about your:

- Sleep patterns
- Use of any medicines
- · Eating habits
- · Mental and physical health history
- · Your family's medical history
- Job and travel patterns.

Your provider may ask your spouse, bed partner, or other family member about your sleep habits. You may also have a physical exam and blood tests.

You may be asked to write down the following when you get up each morning:

- · How long you were in bed
- How much time you think you actually slept
- How many times and when you woke up during the night
- · What time you woke up in the morning
- · Your thoughts about how well you slept.

Your healthcare provider may suggest that you spend a night in a sleep center. At the sleep center your breathing, eye movements, muscle tone, blood oxygen levels, heart rate and rhythm, and brain waves may be recorded while you sleep.

How is it treated?

Your provider may recommend relaxation techniques, changes in diet, and a generally healthy lifestyle that includes exercise. Your provider also will probably recommend a regular sleep routine.

Less daytime napping and more relaxing evening activities will improve your sleep.

Counseling may help you deal with psychological problems or reduce stress that may cause or contribute to your insomnia.

If a medical problem is causing your insomnia, your provider will treat you for it.

If drug or alcohol abuse is the cause of your insomnia, you will need to stop using these substances.

In some cases, a medicine may be prescribed to help you sleep. Do not take any sleep medicine, including nonprescription pills, without your healthcare provider's approval. Some sleeping medicine can be addictive. Your healthcare provider will work with you to choose the right medicine.

How long will the effects last?

Often insomnia lasts for just a few nights. If you cannot sleep almost every night for 2 weeks, tell your healthcare provider. Insomnia that lasts this long usually keeps being a problem until the cause is found and treated.

How can I take care of myself?

- · Tell your healthcare provider if the treatment plan does not help.
- Tell your provider if you have side effects from medicine prescribed for the insomnia.
- Follow your provider's instructions for follow-up visits.

How can I help prevent insomnia?

- · Stick to a routine of going to bed and getting up at the same time each day.
- Limit daytime naps to no more than 1 hour each day.
- Keep active during the day. Exercise and get some fresh air.
- · Use the bedroom only for sleep and sex, not for reading or watching TV.
- Keep the room dark and the temperature comfortable.
- · Consider listening to white noise, such as a fan blowing. Soft music may help.
- Read something light or entertaining just before you go to bed, to get your mind off the day's troubles.
- · Massage or a warm bath before bed may relax you.
- · Avoid caffeine late in the day.
- Don't eat a lot late at night.
- Avoid drinking a lot of liquid before bedtime.
- If you have been in bed for more than 30 minutes and cannot fall asleep, get out of bed and read or watch TV until you are sleepy.
- Keep a healthy weight. Being overweight may cause tiredness during the day and may worsen sleep apnea.
- · Do not drink alcohol within 6 hours of bedtime.

- If you smoke, try to quit smoking entirely. Cutting back on smoking without quitting may lead to nicotine withdrawal in the middle of the night that awakens you
- Talk to your healthcare provider about your medicine schedule. Perhaps you can take drugs that interfere with sleep during the day. Evening may be a better time to take drugs that might make you sleepy.
- Avoid daily use of sleep medicines. You may become dependent on them or build up your tolerance to them so that they no longer work as well. Most sleeping pills should not be used for more than 2 weeks in a row.

Developed by RelayHealth.

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