

Insomnia

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Many people consider snoring and sleep apnea to be the most common sleep disorders. In reality, insomnia is the most common sleep disorder and affects between 30 – 50 percent of all Americans. Insomnia is defined by Webster's as *prolonged and usually abnormal inability to obtain adequate sleep*.

Insomnia can be either acute (lasting one to several nights), or chronic (lasting longer than one month). Insomnia can be brought about by stress, anxiety, change in work schedule, certain medications and even daylight savings time. Insomnia can affect any age or gender, but it is more prevalent in older people and women. It is often a symptom of some other condition.

If you or someone you care about suffers from insomnia, there can be relief. Sleep hygiene, behavioral therapy techniques, and when necessary, medication are a few of the options available for treating insomnia.

Insomnia is one of many sleep disorders that can be diagnosed and treated at your local hospital. Talk with your healthcare provider to see if you would benefit from a sleep consultation.

A Message From Dr. Whitney

By Dr Courtney Whitney, Board Certified Sleep Physician, Owner, Medical Director WSDC
Insomnia can be both a symptom and a diagnosis. The daytime consequences include impaired cognitive function, fatigue and tiredness, a depressed mood, irritability and impaired work performance. It is estimated that 90% of the time insomnia is due to a medical or psychiatric condition. In evaluating insomnia it is important to obtain a comprehensive medical and mental health history. By analyzing the cause of insomnia, treatment strategies can be initiated.

At Whitney Sleep, and the partner hospitals we work with, we start with a consultation. At the time of the consultation we decide whether or not a sleep study is necessary. In most cases we only need to do a sleep study if we are concerned about an underlying arousal disorder. Arousal disorders that can present as insomnia include sleep apnea, restless leg syndrome and periodic limb movement disorder. Cognitive and behavioral therapy for insomnia is effective at resolving or improving insomnia in over 60% of the cases. In some situations medications are also found to be useful.

Insomniacs need an analysis of their sleep. The process is painless. The impact of untreated insomnia can be physically and emotionally devastating. Talk with your physician about your insomnia and let us know if we can help.

In the interim try optimizing your sleep by practicing good sleep hygiene: Regular routine with a relatively stable bedtime and wake time. No naps. No TV or reading in bed. No smoking for at least 1 hour before bed. No Caffeine 6 hours prior to bed. Limit alcohol consumption (it may help you fall asleep but interferes with deep sleep and increases awakenings), exercise, and optimize your sleep environment (cool, quiet, comfortable and dark without disturbance from family, phone or animals).

Do you Think You Might Have A Sleep Disorder?

Yes No

- Do you snore?
- Are you excessively tired during the day?
- Have you been told you stop breathing during sleep?
- Do you have a history of hypertension?
- Is your neck size > 17 inches (male) or > 16 inches (female)?
- Do you wake up to use the bathroom more than twice a night?
- Have you ever fallen asleep while driving?

Answering "yes" to two (or more) of these questions may be a positive screen for Obstructive Sleep Apnea. Patient should consider talking with their Health Care Provider about a referral for a sleep evaluation.

We Can Help!

Discover real solutions to your sleep problems by talking with your Health Care Provider about a sleep study at

The Whitney Wire

The Quarterly Newsletter From Your Friends at Whitney Sleep Diagnostics & Consultants (WSDC)

Not Another Sleepless Night!

Unfortunately, when it comes to getting a good night's sleep, there is no credit given for effort. What this means, is that in the morning, you either awake refreshed and rested or not. Many people cling to the traditional saying, "Early to bed, early to rise makes you healthy, wealthy and wise," and will lay awake staring at their ceiling for hours waiting on sleep. Most sleep professionals will tell them that if they are struggling to get to sleep, then maybe they shouldn't be in bed yet. If you are not able to get to sleep, get out of bed, go to another room and read or do something else that will not stimulate you. After a while, when you feel sleepy, go back to bed and you may be find it possible to get the sleep you deserve.

CPAP Talk By Susan Gunwall, WSDC Clinical Coordinator and Director of Operations

Sleep Hygiene Techniques

Whether you use CPAP therapy or not, good sleep hygiene is essential to healthy, restorative sleep. Below are some simple but important tips for a good night's sleep.

1. Go to bed at the same time every day. Your body has a natural clock and becomes used to rhythms and routines. Turn your CPAP machine on and the light off as soon as you get into bed.
2. Get up at the same time each morning, even on weekends or after a poor night's sleep. Maintain the routine and rhythm you have established.
3. Understand your sleep requirements. Most people need at least 6 hours of sleep for normal memory and cognitive function. You should use your CPAP device when you sleep all night, every night(if applicable).
4. Exercise regularly, but finish your exercise routine at least two hours before bedtime.
5. Spend some time in natural light to promote melatonin production in your body. Melatonin is a hormone that allows you to know when to sleep and how much sleep to get.
6. Create a comfortable sleeping environment. Make sure your bedroom is cool, quiet and dark. A cool (not too hot or too cold) bedroom is most conducive to sleep--but if you use a humidifier with an older CPAP device, you may need the room a little warmer to avoid condensation in your tubing (rainout). Avoid distracting noises and light. If you don't have a comfortable bed, bedclothes or pillow consider changing them.
7. Use your bed only for sleep and sex. Avoid watching television, studying, eating or working in bed. Your brain should associate bed with sleeping.
8. Feel relaxed and warm before bed. A warm bath may help you wind down.
9. Leave your mask on and detach the tubing from the mask if you need to get up during the night. When you get back to bed, it's easier to re-attach the tubing than to refit the mask.

Sleep Hygiene:

Refers to the habits, environmental factors, and practices that may influence the onset, length and quality of one's sleep.

Sleep Fact:

You or someone you care about can be diagnosed and treated for all sleep disorders right at your local hospital.

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About Whitney Sleep Diagnostics & Consultants

Created by Dr. Courtney Whitney, DO, D,ABSM, Whitney Sleep Diagnostics & Consultants (WSDC) serves the sleep medicine needs of hospitals in less populated areas.

Hospitals that partner with WSDC, are able to offer a high quality, AASM accredited sleep medicine program to its patients right at their home town hospital. WSDC diagnoses and treats all 84 known sleep disorders. If you are a patient reading this in a waiting room—your hospital partners with WSDC.

Patients who feel they may have a sleep disorder are encouraged to talk to their healthcare provider about their symptoms. A simple one page screening form can often help determine the need for an overnight sleep study.

Partnering hospitals will soon provide quarterly CPAP clinics where CPAP users can bring their equipment to be inspected and obtain replacement CPAP accessories as needed. If you are in need of CPAP accessories, give us a call at 877-844-6150.