

SLEEP hygiene

Behaviors that help
promote sound sleep



a wellness booklet from
the American Academy of Sleep Medicine





Dear Reader—

Sleep isn't just "time out" from daily life. It is an active state important for renewing our mental and physical health each day. More than 100 million Americans of all ages, however, regularly fail to get a good night's sleep.

At least 84 disorders of sleeping and waking lead to a lowered quality of life and reduced personal health. They endanger public safety by contributing to traffic and industrial accidents. These disorders can lead to problems falling asleep and staying asleep, difficulties staying awake or staying with a regular sleep/wake cycle, sleepwalking, bedwetting, nightmares, and other problems that interfere with sleep. Some sleep disorders can be life-threatening.

Sleep disorders are diagnosed and treated by many different healthcare professionals, including general practitioners and specialists in neurology, pulmonary medicine, psychiatry, psychology, pediatrics, and other fields. As part of its mission, the **AMERICAN ACADEMY OF SLEEP MEDICINE (AASM)** strives to increase awareness of sleep disorders in public and professional communities. The AASM is the major national organization in the field of sleep medicine. We represent several thousand clinicians and researchers in sleep disorders medicine.

For more information about sleep disorders, contact your healthcare professional. For a list of accredited member sleep disorders centers near you, write to us or visit our web site.

Sincerely,

AMERICAN ACADEMY OF SLEEP MEDICINE

2510 North Frontage Road

Darien, IL 60561-1511

Visit our website: www.aasmnet.org

SLEEP HYGIENE



For most people, falling asleep and staying asleep are parts of a natural process. Good sleepers are likely to have developed certain lifestyle and dietary habits that promote sound sleep. These habits or behaviors—known as sleep hygiene—can have positive effects on sleep before, during, and after time spent in bed. Sleep hygiene is mostly a matter of common sense, but the techniques suggested in this booklet may help you sleep better on a regular basis.



HOW Does Stress Affect My Sleep?



Many sleep problems are directly caused by stress. If you sometimes have trouble sleeping because of stress, you may start to develop certain strategies—such as regular napping, excessive use of caffeine, use of alcoholic beverages at bedtime, working at night, or sleeping at irregular times—to help you cope with a disturbed sleep schedule. Yet once you have eliminated that stress, your coping strategy may have already become a habit, sometimes causing sleep problems to continue. You may find yourself in a cycle of repeated difficulty falling asleep; tension and a fear of sleeplessness can result. Your bedroom, for instance, may become associated with unsuccessful attempts to sleep and with tension and anxiety. This may lead you to sleep on a sofa or in a chair because you are no longer able to sleep in your bedroom. This phenomenon, termed conditioning, may respond to the advice in this brochure.

HOW Does Diet Affect My Sleep?



CAFFEINE

Caffeine stimulates the brain and interferes with sleep. Coffee, tea, colas, cocoa, chocolate, and some prescription and nonprescription drugs, including some common pain relievers, contain caffeine.

Although moderate daytime use of caffeine usually does not interfere with sleep at night, heavy or regular use during the day can lead to withdrawal symptoms and to sleep problems at night. If you suffer from insomnia, you should not drink more than 2 caffeinated beverages a day and you should not have any caffeinated substances after noon.



NICOTINE

Nicotine is another stimulating drug that interferes with sleep, and nicotine withdrawal can also disrupt sleep throughout the night. Cigarettes and some drugs contain substantial quantities of nicotine. Smokers who break the habit, once they overcome the withdrawal effects of the drug, can expect to fall asleep faster and wake up less during the night.

“A COMFORTABLE BED IN A DARK, QUIET ROOM IS THE BEST SETTING FOR A GOOD NIGHT’S SLEEP.”

ALCOHOL

One of the effects of alcohol is a slowing of brain activity. When taken at bedtime, alcohol may help induce sleep at first, but will disrupt sleep later in the night. If you have a “nightcap” before bed, you may have awakenings during the night, nightmares, and suffer early morning headaches. For more sound sleep, you should avoid alcoholic beverages within four to six hours of bedtime.

MEALS

Eating a full meal shortly before bedtime can interfere with the ability to fall asleep and stay asleep, as can heavy meals eaten at any time of day or foods that cause stomach upset. A light snack at bedtime, however, can promote sleep. Milk and other dairy products consumed with carbohydrates like crackers, are especially good as bedtime snacks.

“EATING A FULL MEAL SHORTLY BEFORE
BEDTIME CAN INTERFERE WITH THE ABILITY
TO FALL ASLEEP AND STAY ASLEEP...”

WHAT Other Factors Affect My Sleep?

ENVIRONMENT

A comfortable bed in a dark, quiet room is the best setting for a good night's sleep. Some people seem to adjust easily to changes in sleep environment, but others (such as insomniacs and the elderly) can be easily disturbed by small changes in sleep surroundings. If you find light a problem, try using blackout curtains or spot lighting. If noise keeps you awake, try using background sound (“white noise”) or earplugs.

Sometimes, even the bedroom clock can keep you from sleeping.

The more you know what time it is and how much time you may have already lost or how much time you still have to sleep in the morning, the worse you'll sleep. Many people have found

it is better to set an alarm clock for when to get up, then hide the alarm clock in a dresser drawer across the room. Sleeping without time pressure is much easier than counting the minutes lost or those you have left.



EXERCISE

Regular exercise helps people sleep better; the benefits of exercise on sleep, however, depend on the time of day you exercise and on your overall fitness level. If you are physically fit, you should avoid exercising within six hours of your bedtime. Exercise in the morning is not likely to affect your sleep at night, but the same amount of exercise, if done too close to your bedtime, can disrupt your sleep. On the other hand, too little exercise and limited daytime activities can also lead to sleeplessness at night. Boredom during the day (for example, after retirement) seems to be as detrimental to sound sleep as excessive stress. If you have a tendency toward insomnia, exercise and other types of daytime activity may help you sleep better. Consult your healthcare provider before beginning an exercise program.



WHAT Can I Do To Sleep Better?

DISTRACT YOUR MIND

Lying in bed frustrated because you cannot fall asleep, and trying harder and harder to fall asleep, will never help you sleep. If you have trouble sleeping, try distracting your mind by reading, watching a videotape (not television, because that gives you the time), listening to a book on tape, etc. For some people, it is good to do this in bed; other people find a different room better.

CURTAIN TIME IN BED

Most insomniacs stay in bed longer than they should. This makes sleep more shallow and riddled with awakenings. Many people find that consistently cutting of time spent in bed helps them sleep more soundly and leads to a more refreshing sleep.

MANAGING STRESS

As mentioned earlier, the stress that stems from common life situations often contributes to sleep problems. A relaxing activity around bedtime can help relieve tension and encourage sleep. Taking some time to think clearly about your problems and propose a few solutions can have a positive effect on your sleep quality. Talking with a trusted friend or colleague to “air out” troubling issues also can be helpful. Relaxation exercises, meditation, biofeedback, and hypnosis are sometimes good methods for controlling sleep problems. These techniques should be learned from a psychologist, physician, or other healthcare professional.

“IF YOU HAVE A TENDENCY
TOWARD INSOMNIA, EXERCISE AND
OTHER TYPES OF DAYTIME ACTIVITY
MAY HELP YOU SLEEP BETTER.”

DESIGNATING “WORRY TIME”

Another technique that can be helpful is to designate a particular time for worry. This time is dedicated to sorting out problems and coming up with possible solutions. Set aside 30 minutes in the evening to sit alone and undisturbed. Try writing down problems in a list. Write your more serious worries on 3 x 5 cards, where you write one worry as it comes to mind (one per card). When you have all of your worries written down, sort the cards into three to five piles, according to the priority of each worry. Next, look at each card and formulate a possible solution to that worry. While not all worries will have easy solutions, even small progress in remedying a worry can yield helpful results. The morning after recording your worries, review the worry cards and begin to work on resolving the worries you’ve identified.

TABLE 1 Practices conducive to good sleep

- Try to sleep only when you are drowsy.
- If you are unable to fall asleep or stay asleep, leave your bedroom and engage in a quiet activity elsewhere. Do not permit yourself to fall asleep outside the bedroom. Return to bed when--and only when--you are sleepy. Repeat this process as often as necessary throughout the night.
- Maintain a regular arise time, even on days off work and on weekends.
- Use your bedroom only for sleep, sickness and sex.
- Avoid napping during the daytime. If daytime sleepiness becomes overwhelming, limit nap time to a single nap of less than 1 hour, no later than 3 p.m.
- Distract your mind. Lying in bed unable to sleep and frustrated needs to be avoided. Try reading or watching VCR or listening to books on tape. It may be necessary to go into another room to do these.
- Avoid caffeine within four to six hours of bedtime.
- Avoid the use of nicotine close to bedtime or during the night.
- Do not drink alcoholic beverages within four to six hours of bedtime.
- While a light snack before bedtime can help promote sound sleep, avoid large meals.
- Avoid strenuous exercise within 6 hours of bedtime.
- Minimize light, noise, and extremes in temperature in the bedroom.



Further Reading on Sleep Hygiene

Bodyrhythms: Chronobiology and Peak Performance, *by Lynne Lamberg* (William Morrow and Company, Inc., 1994)

No More Sleepless Nights, *by Peter Hauri, PhD, and Shirley Linde, PhD* (John Wiley and Sons, Inc. 1990)

Encyclopedia of Sleep and Dreaming, *edited by Mary A. Caskadon, PhD* (New York: Macmillan, 1992)

Wellness booklets available through the **AMERICAN ACADEMY OF SLEEP MEDICINE**

Circadian Rhythms

Coping with Shift Work

Insomnia

“My Child Can’t Sleep”

“My Child Snores”

Narcolepsy

Obstructive Sleep Apnea and Snoring

Overnight Sleep Studies

Parasomnias

Positive Airway Pressure Therapy for Sleep Apnea

Restless Legs Syndrome & Periodic Limb Movement Disorder

Sleep and Depression

Sleep and Health

Sleep as We Grow Older

Sleep Hygiene

Sleep in Women

Treatment Options for Obstructive Sleep Apnea Syndrome

The **AMERICAN ACADEMY OF SLEEP MEDICINE** (AASM) is proud to provide these wellness booklets about sleep habits and sleep disorders to the public.

Please send one business-size self-addressed stamped envelope *per booklet* to the AASM, along with a request specifying which booklet you would like to receive.



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Most wellness booklets include reading lists for additional information.

