

# Sleeplessness

## A. Causes of Sleeplessness

### *i. Environmental*

- An uncomfortable bed or uncomfortable bed clothes.
- Being too hot or too cold.
- Being in a noisy or otherwise stimulating environment.
- Proximity to, or distance from, other people.

### *ii. Behavioural*

- A change in sleeping environment.
- Irregular daily routines of activity and rest.
- Differences in activity routines between the school week and weekends or holidays.
- Late evening or night use of the computer, television and other screens.
- Having a cell/smart phone in bed or at bedside.
- Eating a large amount before bedtime.
- Taking a hot bath or shower right before bed.
- Traveling to/from another time zone.

### *iii. Cognitive (thinking)*

- Invasive, distracting thoughts while trying to sleep; worrying.
- Preoccupation with 'trying' to sleep.

### *iv. Affective (feelings and emotions)*

- Stress or anxiety.
- Excitement or anticipation.
- Bereavement or depression.

### *v. Biological*

- Use of stimulants such as caffeine, nicotine, marijuana, cocaine, some medications.
- Change in use of street drugs, alcohol, medications.
- Consumption of certain food products.
- Exercising too close to bed time.
- Pain and painful illnesses.
- Psychological disorders.
- Chronic medical illnesses.
- Thyroid over-activity or other hormonal imbalance.
- 'Restless leg syndrome', leg cramps, itching.
- Coughing.

## B. Results of Sleeplessness

- Tiredness during the day and dozing off during passive activities; lethargy.
- Difficulty performing some tasks.
- Impairment of short-term memory, concentration, alertness.
- Altered mood, irritability; difficulty reacting in stressful situations.
- Compromised immune function, decreasing ability to fight infection.
- Anxiety over difficulty sleeping – cyclical response/feedback.
- Further difficulty falling asleep.
- Increased chance of accidents.
- Burn-out.

## C. Possible Solutions to Address Sleeplessness

### *i. Environmental*

- Create a sleeping environment that is comfortable and peaceful.
- Wear ear plugs.
- Darken the sleeping space by using opaque curtains.

### *ii. Behavioural*

- Spend the hour before going to bed in subdued lighting.
- Develop a consistent rhythm of activity and sleep.
- Maintain a regular routine of preparation for bedtime.
- Avoid napping during the day.
- Wake up at the predetermined time every morning, even if tired.
- Avoid looking at the clock when trying to sleep.
- Store technology (computer, cell/smart phone) away from the bedroom at night.
- Get up from bed if unable to sleep in 20 min., then do a simple, relaxing activity of short duration and go back to bed.
- Use deep breathing, progressive muscle relaxation, visualization, meditation, yoga.
- Avoid stimulating activities for an hour before bed time, such as computer use, exercise, emotionally arousing interactions.

### *iii. Cognitive (thinking)*

- Use thought-stopping exercises.
- Put some paper or a diary beside the bed for writing down distracting thoughts.
- Use positive self-talk to replace negative thoughts about sleeping.

### *iv. Affective (feelings and emotions)*

- Employ interventions to address stress, anxiety, anticipation, depression.

### *v. Biological*

- Avoid consumption of coffee, caffeinated beverages and chocolate in the evening.
- Avoid substances that cause stimulation and sleep disturbances, such as nicotine, marijuana, cocaine and some medications.
- Consume warm milk or chamomile tea.
- Use a safe, biologically active substance such as melatonin; consult a physician.
- Utilize medications as prescribed, and be aware of side-effects.

When sleeplessness continues for a prolonged period of time, impacting normal functioning and resulting in negative effects, consult a doctor. A general practitioner can refer to a pediatrician when necessary. For chronic challenges with sleeplessness, the sleep disorder clinic at U.B.C. does intensive assessments.