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You've counted sheep and drank warm milk, but sleep just won't seem to come.

How's a girl to get a good night's rest?

Change how you think

"Sleep is just as important as diet and exercise to our overall health and well-being," said David Cloud, CEO of The National Sleep Foundation. "Unfortunately, only 42 percent of Americans agree that sleep is the most important or at least equally important to diet and exercise."

Although individual needs vary, adults typically need between seven to nine hours of sleep per night.

"Eight hours is really necessary," said Dr. William Noah of the Sleep Center Murfreesboro. "In a study published two years ago, (it showed) you live longer the more you sleep up to eight or nine hours (a night). But the big (health) risk is those who sleep less than six hours."

Until the 1990s, the importance of sleep was virtually ignored in the medical world, Noah said.

"Physicians thought that it was what we were doing during the day that was causing (our health) problems," he said. "We now know that it's also what we do at night."

Change your sleep setting

Sometimes it's all about changing your surroundings. Oftentimes, distracting objects not conducive to sleep have crept in the bedroom. Think the laptop, bills that need to be paid and work from the office.

Creating a sleep-conducive environment that is dark, quiet and comfortable is key.

Sometimes, it takes getting away from all the usual distractions altogether.

Carriage Lane Inn owner Sharon Petty understands that concept.

"I have women who will just come over (to the inn), just for a quick getaway," she said. The change of scenery works for some.

Change your bedtime habits

You may have learned the hard way the effect of having caffeine too close to bed time. The same applies for other substances and habits. Experts suggest avoiding alcohol and nicotine right before bed as well. When it comes to exercise, the National Sleep Foundation suggests hitting the gym no less than three hours before hitting the sack.

Other bad habits, or sleep "hygiene" issues, that could be disrupting your sleep patterns would include not keeping a regular sleep schedule, having caffeine after 4 p.m., consuming alcohol late at night, sleeping with the TV on and taking naps. These practices all diminish the quality of a person's sleep.

"A lot of patients that we see have sleep hygiene issues as their main sleep disorder," Noah said.

But when your sleep hygiene is up to par, and you're still not sleeping well, it may be time to see a specialist.

Sleep apnea

Snoring is not just funny or annoying, Dr. Noah said, it is usually a sign of something more serious. Snoring, he said, has been linked to a number of serious health conditions, including high blood pressure, diabetes, heart disease, stroke, depression/anxiety, gastroesophageal reflux disease, obesity, fibromyalgia and early death. In children it can lead to hyperactivity or attention deficits.

"A snore is a sign of airway constriction," Noah explained.

When a person is lying on his back, his airway becomes smaller because of gravity pulling the tongue back in the airway.

But people do not snore until they fall asleep. This is because the throat muscles relax during sleep, causing soft tissue in the back of the throat to further constrict.

"For some individuals, because of genetics -- an overbite, small chin, large tongue or tonsils, or simply a smaller airway -- or obesity, this constriction is enough to reduce airflow to the lungs and produce a snoring sound," Noah said.

"About 80 percent of snorers actually have enough airflow obstruction to produce small decreases in their blood-oxygen levels that their brain doesn't like," he said.

The sleeping brain reacts to the lack of airflow by rousing sufferers sometimes hundreds of times during the night -- without their knowledge or memory of it -- and making a solid eight hours unlikely. The repetitive rousing at night causes the sufferer to be tired during the day. This particular condition is known as obstructive sleep apnea and affects probably 20 percent of women and 25 percent of men. Yet, nearly 90 percent of the cases go undiagnosed, according to Noah.

"The big problem," Noah explained, "is that the arousals are produced by release of epinephrine (adrenaline) in the brain, which raises blood pressure and blood sugar."

Last year, the American Diabetes Association recommended that all type II (adult onset) diabetics be screened for sleep apnea. The previous year, the Joint Commission, which accredits hospitals, recommended that all patients with high blood pressure should be screened for sleep apnea.

In addition, patients with heart disease (heart failure, coronary artery disease and arrhythmias) and stroke should be screened as well.

"If someone witnesses you snore or if you notice you're frequently tired or awaken unrefreshed, you should strongly consider being evaluated by an accredited sleep center," he said. "We now know that treatment can improve or prevent many serious medical conditions."

Insomnia

A random night of sleeplessness in one's lifetime isn't cause for alarm. It's when this continues for a long period of time that concern arises.

"Short-term insomnia is a normal reaction to major life stresses, such as a divorce or job loss," Noah said. "But once the condition has gone on for a while, then the worry becomes, 'I'm not going to be able to sleep.' It becomes self-perpetuating and chronic.

"Chronic or psychophysiological insomnia -- present for at least three months -- is more common in women, especially post-menopausal women, and is a serious problem which significantly lowers one's quality of life," Noah said.

It also increases the risk of high blood pressure, diabetes, heart disease and stroke. Some sufferers have difficulty getting to sleep while others have difficulty maintaining sleep. They wake up after a few hours and have trouble returning to sleep.

Medication is not the answer, Noah said.

"It just leads to a worse problem," he said.

The good news is that cognitive behavioral training performed by an experienced sleep specialist can cure 80 percent of insomnia patients in just a few sessions.

Delayed sleep-phase syndrome

Sleeping in may not be the best thing to do if you're trying to have a constant record of good sleep.

Noticed in college students and young adults is a condition known as delayed sleep-phase syndrome. Over a period of time, staying up late alters the body's internal clock, making it hard to go to sleep earlier, say at 11 p.m. to get up for 8 a.m. class or job. It is what he described as a circadian rhythm disorder, in which doctors actually have to reset the internal clock through therapy which may include light exposure, melatonin-like drugs and schedule changes.

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Sleep-friendly factors

Use your senses to scan your bedroom for a few sleep-friendly factors:

Look around your room: Do you see a television? Do you see a laptop computer or other office equipment? Piles of paperwork?

Turn off the lights in your bedroom. Now count how many tiny flickers of light still shine. If you lost count after your cell phone, your laptop, the lights from the television, the DVD player, the alarm clock, the street lamp outside, and your iPod dock, your bedroom isn't very sleep-friendly.

Close your eyes and listen to the sounds of your room. How many different distinctive sounds can you detect? Do you hear the washer and dryer tumbling or the train rumbling? Is there street noise?

Take a moment to feel the air in the room. Is it stuffy? Overly hot? Too chilly? Just right?

As you tuck in, think about the comfort level of your bed itself. Is the mattress meeting your needs? Are your sheets and blankets appropriate for the season?

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