

Insomnia

SDA Fact Sheet - AT04

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Insomnia: Most people experience difficulty sleeping (insomnia) at some time. It is the second most common medical complaint with almost one half of older adults experiencing symptoms of insomnia on a few nights a week. Despite this few people seek help from their doctor. Insomnia costs the Australian community over half a billion dollars each year in direct medical costs and as much as ten times that amount in indirect costs such as lost productivity or days off work. For both the community and the sufferer it is an issue that should not be ignored

What is insomnia? Simply put, insomnia is an inability to fall asleep or to stay asleep. Sleep onset insomnia occurs at the start of the night when the person cannot fall asleep but just as troubling for many people are problems with waking during the night or waking up too early. This is called sleep maintenance insomnia. As everyone differs in what they think a good night's sleep should be, the complaint of insomnia is very variable and the health professional must rely on the person's perception of their sleep.

What is "normal" sleep? Although there is no simple answer to this, most people sleep between 7 and 9 hours each night. Different people may need different amounts of sleep but there is a tendency with the pressures of modern life for the total amount of sleep to be less than desirable. If you sleep less than 7 hours per night you may be depriving yourself of adequate sleep.

What is a normal length of time to take to fall asleep? Again everyone is different. One third of women and one sixth of men report taking longer than 30 minutes to fall asleep. Some people may be quite happy with this but if it is of concern to you then you have insomnia.

Is it normal to wake up during the night? Particularly as people get older, sleep becomes more fragmented and waking up briefly during the night is quite normal. If the awakenings are brief you will not remember them, however, if you wake and have trouble falling back to sleep this is insomnia.

Can a sleep test tell if I have insomnia? There is no simple test for insomnia. A sleep study may show that you took a long time to fall asleep or that you woke during the night but does not tell how you would sleep at home. Surprisingly, studies in the sleep laboratory show many people with insomnia actually sleep much more than they realise. Keeping an accurate sleep diary of when you went to bed, when you went to sleep, when you woke up and how many awakenings you had may be useful to help your doctor assess the severity of the problem.

How common is insomnia? In a recent survey by the National Sleep Foundation in America 48% of older adults report having symptoms of insomnia at least a few nights per week. 18% report difficulty falling asleep, 33% wake too often and 23% wake too early. Insomnia is almost twice as common in women as in men and becomes more frequent in the older population. Shift workers are also at risk of insomnia because the demands of everyday life and altered sleeping conditions may make it hard for them to get enough sleep during the day.

Does insomnia have impacts on health? There is now very clear evidence that people who suffer from insomnia perform more poorly in the daytime. They report lack of energy, irritability, poor performance at work, memory difficulties, concentration problems, and one study found twice as many fatigue related automobile accidents when compared to good sleepers. There is also evidence that insomniacs have a greater risk of heart disease and some studies have gone so far as to suggest a higher death rate. Psychological conditions such as depression or anxiety have been shown to commonly occur with insomnia. Insomnia should not be taken lightly.

What is the cause of insomnia? There is not one simple cause of insomnia. Some medical conditions may cause insomnia, particularly pain, respiratory problems such as asthma, or other sleep disorders. Some medications such as blood pressure tablets or asthma medication as well as drugs like caffeine (coffee), nicotine (smoking) and alcohol, may also cause insomnia. Worries or life events such as a divorce, death or illness of a family member are also common causes. Conflicts or pressures at work may also be a factor but when these are resolved sleep should improve.

Insomnia is a vicious cycle. That is, the more you worry about not sleeping, the more you worry about going to bed and the more likely you are to continue to experience insomnia. While you might fall asleep watching TV when you go to bed your mind races and you are wide awake. Unreasonable expectations about what constitutes a good night's sleep may also contribute to this vicious cycle.

When should you seek help for insomnia? Almost everyone experiences sleepless nights from time to time, usually as the result of stressful life events. However, if this goes on for more than a few weeks or if you have used sleeping pills more than 2 weeks and cannot get a good night's sleep without using them, you should seek help.

What is the best treatment for insomnia? Just as there are many causes for insomnia, so there are many treatments. In most people insomnia will get better by itself. If there is an underlying medical or psychological condition, such as depression, addressing this may cure the insomnia. Psychological assistance with stress management, relaxation and controlling thoughts may be helpful as can attention to simple environmental factors. Information and education about sleep habits and expectations form part of most programs. The main goal of any treatment for insomnia is to break the vicious cycle that maintains the insomnia. Attention to simple things such as going to bed and getting up at the same time, avoiding naps, caffeine and alcohol, doing appropriate exercise and using the bedroom only for sleeping may help. Collectively these factors are important to what is called good sleep hygiene.

What is the role of sleeping tablets? Sleeping tablets may be prescribed for short-term insomnia but lose their effectiveness after a few weeks and may not be appropriate for more than four weeks. When you stop taking sleeping tablets you may have a few nights of worse sleep. This is called rebound insomnia and is another reason to avoid long term use of sleeping tablets. It is usually best to reduce sleeping tablet use rather than stop abruptly.

Where do I go to get help with insomnia? Your first line of approach for any medical problem should be to consult your family doctor. Despite the large number of people with insomnia only 4% have been diagnosed with insomnia by their local doctor. If sleep is worrying you, a frank and open discussion with your doctor may help to decide what is an appropriate line of treatment and your doctor may refer you to a psychologist for general advice about sleep habits or to a sleep disorders specialist.

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