

The British Tinnitus Association

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Good Night Sleep Tight

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This information is not a substitute for medical advice. You should always see your GP / medical professional

Insomnia is defined, amongst other things, as difficulty in falling and/or staying asleep. Mild sleep disturbances are very common, but to be classified as 'insomnia' the delay in going to sleep or going back to sleep needs to be considerable, occurring at least three or four times a week and persisting for six months or more.

Sleep disturbance affects most people at some stage of our lives. It is common not only in adults but also in children, and is particularly prevalent amongst the elderly.

Sleep is a 24-hour cycle, so activities that we carry out in the day will affect the following nights sleep. A normal night's sleep has several stages, from light to deep sleep, including several awakenings, the first after just a couple of hours sleep. Natural awakenings are usually forgotten by the morning, but if a person worries about his or her tinnitus during them, they will last much longer and will be remembered. It seems most likely that tinnitus does not actually wake people, but of course, it can be the first thing they notice when a natural awakening occurs. Many people with tinnitus do in fact sleep well and see sleep as a refreshing escape from tinnitus. Those who sleep well do not seem to have different tinnitus from those who have trouble sleeping. But those who sleep badly worry more at night than people with tinnitus who sleep well. The beliefs and worries that we have about the quantity of sleep, or about the affects of not sleeping, or about tinnitus generally, have more of an impact on sleep problems than the sound of tinnitus.

As people grow older they experience less very deep sleep and more awakenings. Sleep becomes lighter and more fragmented and there is a tendency to nap during the day. Most people get about seven or eight hours sleep, but normal sleep times vary enormously.

Why sleep?

Surprisingly, the exact reason for sleep is unclear. Possibly it conserves or restores energy, but the evidence for this is not completely clear. People do tend to feel bad if they have not slept well, but no known changes in the body's biochemical or metabolic mechanisms result from sleep loss. Long term or 'chronic' sleep loss should be distinguished from short term loss.

People who have been deliberately deprived of sleep in the laboratory tend to do less well on some psychological tests. In this context people often perform logical, deductive tests (like IQ tests) well but perform more poorly on tests of 'executive' functioning that require more creative thinking. These effects are seen after prolonged periods without any sleep and they are reversed by about four hours sleep. The effects of 'jet lag' are also well known to many; however, it is not clear whether this is a result of sleep loss, or more to do with disruption of the body clock.

The pattern is different, however, amongst those who have chronic poor sleep. Poor sleep is not the same as no sleep and it is clear that many people perform very well on little sleep, in spite of feeling bad. Clearly, people need to act sensibly and be aware of their limitations, but for many people a loss of sleep may not have the devastating consequences that most of us fear. Worrying about sleep loss is one of the things most likely to keep it going. As far as we know, no-one has ever died just from lack of sleep.

Some do's and don'ts

It is worth talking to your doctor if you suffer from insomnia. Sleep loss may be related to some other medical condition which may be treatable. Many GPs offer medication to help people sleep. Such medications have had a bad press in recent years, but should not be rejected out of hand. With medical guidance in the selection of the right medicine and its proper use, a short term crisis can be greatly relieved.

Sleep is very much a matter of habit or routine. More often than not, poor sleep results from poor routines, and often people's attempts to solve their sleep problems actually make them worse.

- **Avoid using alcohol or 'over the counter' medicines to induce sleep** - they may send you to sleep but will also disrupt the normal sleep pattern. You may wake sooner and have trouble getting back to sleep.
- **Limit the amount of caffeine - (tea, coffee, cola, etc.) & nicotine you take** both are stimulants and will keep you awake.
- **Keep active during the day.** Fit people sleep better than those who are not fit. **Avoid exercise near bedtime.** Exercise late at night may tire you out but it also disrupts the normal sleep cycle.

- **A busy mind makes it more difficult to sleep.** Try to unwind for at least an hour before bedtime. Spend a set amount of time (say 15 – 20 minutes) each evening, writing down any worries that you have and considering how to resolve them.
- **Practise relaxation exercise** during the day and find some short form of relaxation to try at night.
- **Go to bed when you feel sleepy** - not just because it's a certain time on the clock.
- **Avoid using the bedroom for things apart from sleep** - don't watch television, do crosswords, write reports etc. in bed.
- **When you get into bed turn the light off straight away** - tell yourself that sleep will come when it is ready. Don't 'try hard' to go to sleep, resting in bed can be just as helpful. If you are not asleep in 25 to 30 minutes, get up and go to another room and do something relaxing like reading. Go back to bed when you feel sleepy again. Repeat the process if you are not asleep in another 30 minutes.
- **Stick to a routine.** Get up at the same time each day – even at weekends. Try not to sleep in the day.
- Sometimes people take it easy after a bad nights sleep. This might make the day more boring and increase the sense of tiredness. **Most people can still do a lot after a bad night and if they do they feel better for it** – but use common sense.

Further Reading

Overcoming Insomnia and Sleep problems: A self-help guide using Cognitive Behavioral Techniques. By Colin. A. Espie. (Robinson Publishing, ISBN-10: 1845290704)

Sleepfaring: A Journey Through the Science of Sleep. By Jim Horne (OUP Oxford, ISBN-10: 019922837X)