

Family Connect

Sleep Disturbances

The Facts

- Sleep pattern changes are part of normal aging, affecting both quantity and quality of sleep.
- Persons with mental disorders, particularly dementia and depression, are more at risk for being awake at night.
- Sleep disturbance in dementia is best understood by assessing it using the NDB model. (see *Family Connect: Need-Driven Dementia-Compromised Behaviors, NDB*)
- Sleep hygiene, which emphasizes personal habits and daily routines, is the backbone of managing both normal disturbances and those caused by mental disorders.

The 3 W's of Sleep Disturbances

Sleep disturbance is a common and upsetting problem for adults of all ages. Although medication may be used as a short-term intervention, *sleep hygiene*, which calls for changes in daily routines and habits, is the foundation of longer-term solutions. Consider the 3 W's to understand and manage sleep disturbances.

WHAT are sleep disturbances?

Sleep disturbances are various forms of insomnia, referring to an inability to:

- Get to sleep or stay asleep
- Return to sleep after awakening
- Remain asleep early in the morning



WHY focus on sleep disturbances?

Insomnia is an important quality of life issue and is a common problem in people of *all* ages

- One-third of all adults report sleep problems, and one-half of these individuals consider the problem serious

WHO is at risk?

Advancing age alone increases the risk of sleep disturbance. Older adults report:

- More hours in bed, fewer hours asleep, and reduced quality of sleep

Physical factors also increase risk:

- Physical changes associated with normal aging affect sleep
- Medical problems or other health conditions affect sleep

Losses resulting from dementia further complicate risks. Sleep-wake disturbances:

- Are a common problem due to circadian rhythm changes (*described on the next page*)
- Are associated with more severe cognitive impairment
- Coexist frequently with disruptive vocalizations (e.g., aggressive, agitated vocal behaviors)
- Result in nighttime wandering, the second most common reason for placement in a facility

Circadian Rhythm Disturbance

The circadian rhythm refers to the internal biological clock, which affects many levels of function. Brain changes due to dementia disturb the natural daily rhythms and often contribute to sleep problems.

Rhythm disruption in Alzheimer's disease is suggested by:

- Disrupted body temperature rhythms
- Disturbed circadian pattern of locomotor function
- End-of-day patterns in disruptive vocalization and overall agitation (e.g., sundowning)
- Seasonal variations in sundowning

Assessment

Sleep disturbance in older adults is rarely caused by a single factor. Investigate all possible causes.

Consider behavior as a Need-Driven Dementia-Compromised Behavior (NDB)

- Review assessment parameters (e.g., overstimulation, pain & discomfort, depression, psychosis)
- Consider life-long routines and habits
- Who is sleep disturbance a problem for?

Rule out physical and medical causes

- Medical problems
- Pain, need to void
- Medication side effects
- Psychiatric illness
- Sleep apnea
- Restless legs

The 4 Principles of Sleep Management

1. *Don't assume problem is dementia-specific*
2. *Identify and treat underlying or contributing causes of sleep disturbance*
3. *Apply sleep hygiene principles (see pg. 3)*
4. *Use medication on as-needed, intermittent basis*

Treatment Approaches

Effective sleep management relies on individualized care practices that address the unique characteristics of the person with dementia, the caregiver, and the environment in which care is delivered. Interactions between these three must be considered when addressing sleep disturbances.

1. Identify and treat all concurrent problems
2. Then use behavioral interventions
 - Keep a sleep diary, log
 - Apply principles of sleep hygiene (see pg. 3)
3. Use medications as the last choice
 - Consider risks and benefits, and use only as needed
4. Individualize care and routines
 - View the person as a whole, know their history and personal preferences
 - Caregivers may need to adjust expectations to accommodate nighttime wakefulness
 - Ask: Who has the problem? (e.g., caregiver, family, person with dementia)
5. Create systems in which the person can stay safe
 - Modify the home to increase nighttime safety
 - Use respite or trade care with family members

Speak with your provider or pharmacist about symptoms and medication options.

Interventions: Principles of Sleep Hygiene

Routines: Apply patterns of living that contribute to sound sleep. Reestablish habits and develop and maintain a routine.

- Eating, sleeping, resting, exercising
- Person-centered, individualized approaches
- Affected by retirement, illness, institutional routines

Rising & Bed Times: Rise and retire at the same time each day

- Keep up routine on weekends or days off – consistency in habits is important

Exercise: Exercise regularly, but not late in the day

Sunlight: Get out in the sun, especially in late afternoon

Meal Times: Eat meals on a regular schedule

- Avoid heavy meals close to bedtime
- Light snacks are okay if hunger is an issue

Napping: Avoid daytime sleeping

- Naps should be no longer than 30 minutes
- Rest in a recliner or on the couch
- Use your bedroom for nighttime sleep
- Don't lounge in bed (e.g., watching TV)

Substances: Avoid caffeine, nicotine, and alcohol

Voiding Urges: Reduce nighttime voiding urges

- Limit fluid intake after supper
- Toilet before going to bed
- Take diuretics early in the day if possible

Pain Management: Treat pain appropriately

Environment: Regulate environmental factors

- Temperature (e.g., not too hot or too cold)
- Noise: reduce or eliminate adverse stimuli (e.g., excessive noise at night), consider nature sounds or soft music to calm and soothe, try white noise to mask sounds
- Lighting: evaluate distractions (e.g., moonlight through window, hall light), balance safety with darkness
- Personal comfort: bed, clothing, or blankets that are soft and comfortable (e.g., not too hard or too soft)

Alternative Interventions to Promote Sleep

Bright Light Therapy

- *Apply light in the evening if early bedtime & awakening, or in morning if late bedtime & awakening*
- *Sleep hours can increase with light therapy*

Relaxation Principles

- *Low-stimulus, relaxing activities*
- *Back rub, facial or shoulder massage, warm bath, music or aromatherapy, etc.*