# **Strategies to Get a Better Night's Sleep**

#### **Stimulus Control**

The aim of stimulus control is to re-find your connection between the bed/bedroom and faster time to fall asleep

- Go to bed only when sleepy.
- Use the bed and bedroom only for sleep and sex.
- If unable to fall asleep within 15–20 minutes, go to a different room and read or engage in quiet activities (no TV, cell phone or computer).
- Return to bed when sleepy again.
- Get up at the same time each day regardless of how long or little you have slept.
- Avoid daytime naps.

#### **Sleep Restriction**

The aim of sleep restriction is to decrease your time spent in bed in order to reduce the chance that you will have a poor and broken sleep.

- With your primary care provider, figure out approximately how much time you spend actually sleeping each night. For health reasons this cannot be less than five hours.
- Choose the time you need to wake up each morning (this will now include weekends no change in that schedule on weekends).
- Now go to bed at the time that you have decided is how long you sleep each night (that is, if you need to waken at 6 am and you sleep only six hours on average, you will not go to bed before midnight).
- Do not be discouraged. You will still have short periods of insomnia and you may feel even more tired for the first several days. This will get better. It takes time to "unlearn" the behaviour that is causing your insomnia.
- Once you feel that your sleep has gotten better, feeling really tired during the day may tell you that you need more sleep. At that point, you may add 15–30 minutes each week until you are sleeping about 90% of the time. It is important to keep the same time to get up even on weekends.

#### **Progressive Muscle Relaxation (Guided Imagery, Meditation)**

Progressive muscle relaxation is a deep relaxation technique that physically settles the body. This, in turn, calms your mind and makes it less "busy."

- Tense one muscle group at a time (for example the hands or the feet; part or all of the arms or legs; squeeze the buttocks).
- Then really relax that muscle group. Concentrate on feeling the difference between the extreme tension and the relaxation.
- Work in a specific order (for example, feet to the top of the head or from the arms/legs into the centre of the body)
- You will find that you can create even more tension as you practise.
- You may consider doing meditation or imagery with this.
  - Imagery: imagine yourself in a peaceful place such as a beach in the tropics. Really SEE and FEEL yourself there. Hear the sounds.
  - Meditation: focus your mind on a single light like a candle or repeat a positive statement to yourself over and over again.

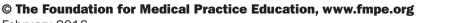
**Deliberately trying to get rid of negative thoughts or habits around sleep** (called paradoxical intention in psychotherapy): It is important to purposely think about what keeps you from sleeping, to learn about what that is and to get rid of the behaviour.

- What do you fear most about your insomnia: being unable to get to sleep; not getting enough sleep; concern over how you are going to function at work?
- Try staying awake on purpose, even when you feel you desperately need to get to sleep (This could be the reason you CAN'T get to sleep. You could be trying too hard).
- Once you have learned to stop trying so hard to go to sleep, you could decrease the time it takes for you to fall asleep.

## **Other Strategies**:

Other strategies work to replace the untrue beliefs and attitudes that you have about sleep and replace these ideas with more flexible options.

- With your primary care provider, go over the following and talk about other options
  - o impractical hopes for sleep (I MUST get at least eight hours of sleep every night)
  - o your untrue beliefs about what causes your insomnia (My insomnia is due to a chemical imbalance)
  - o your obsession over not getting enough sleep (I am USELESS after a bad night's sleep!)
    - o worry about the need to control your sleep (see above)



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## The Risk of Long-Term Treatment With Sedative-Hypnotic Medications

Medications that you may be using to help you sleep (sleeping pills) are called sedative-hypnotics. They can be addictive and have side effects. Below are a few examples of these medications (there may be others that you are taking).

- alprazolam (Xanax®)
- diazepam (Valium<sup>®</sup>)
- temapzepam (Restoril®)

- zolpidem (Sublinox®)
- lorazepam (Ativan®)

## FACT

- 1. It is **no longer recommended** that you take this type of drug to treat your insomnia or sleep problems. With this medication, you are at great risk of memory and concentration problems, daytime fatigue, falls and fractures.
- Even if you think you are NOT having any side effects, even a small amount of one of these drugs can affect the way your brain performs and slow down your reflexes. As you get older, these drugs stay in your body for longer and longer periods of time, affecting your balance and other senses. Daytime drowsiness can lead to car accidents and sleep walking.
- 3. It is possible for your body to develop a physical addiction to this medication. If you have developed such a dependency, your healthcare provider will help you to slowly cut down on the drug and help you in finding other ways to deal with your sleep problems. If you stop the drug too quickly, however, you may have trouble sleeping. You need medical advice on how to stop correctly and slowly over time.

## Ask yourself....

- Have you been taking this sedative-hypnotic drug for a while?
- Are you tired and often sleepy during the day?
- Do you ever feel as if you have a hangover in the morning, even though you have not been drinking?
- Do you ever have problems with your memory or your balance?

## **Other options**

You can make other lifestyle changes that can help with your sleeping issues: for example:

- Exercising regularly during the day.
- Avoiding caffeine, tobacco products, or alcohol, especially close to bedtime.
- Avoiding the use of any screen devices (e.g., cell phones, video games, TV watching) at bedtime.
- Using relaxation/meditation techniques at bedtime.
- Using the bedroom only for sleeping and sex.

