PATIENT HANDOU



## TIPS

## for Coping With Insomnia

Insomnia is the inability to fall or stay asleep. Insomnia is approximately twice as prevalent in women as in men, and is more common in older than in younger people. You may be better able to cope with your insomnia by following these tips.

**Understand the types of insomnia.** There are two kinds of insomnia—primary and secondary. Primary insomnia means that the sleep problems are not directly associated with another health condition or problem. Secondary insomnia means that the sleep problems coexist with another health condition.

Resist the urge to take a long nap. Taking a nap during the day may make it more difficult for you to sleep at night. If you feel drowsy throughout the day, limit your nap to 30 minutes before 3 pm.

**Opt to exercise earlier in the day.** Exercising close to bedtime may stimulate you and make it difficult to fall asleep. Experts recommend not exercising for at least three hours before the time you go to sleep.

**Avoid over-the-counter (OTC) sleep aids.** Sleep experts generally advise against the use of OTC sleep aids because of side effects and questions about their effectiveness. Though they are not for everyone, consider dietary and herbal supplements. The two most popular supplements for insomnia are melatonin and valerian.

**Change how you use devices.** Avoid reading from a backlit device such as an iPad or laptop before bedtime. Backlit devices may stimulate your brain, making it harder for you to sleep. If you use an e-reader, use one that is not backlit.

**Make adjustments to your sleep environment.** Noise, light, and heat can interfere with sleep, so ensure that your bedroom is quiet, dark, and cool. Outside noise can be hidden with a white noise machine or earplugs. An open window or fan can keep your room cool, and blackout curtains or a sleep mask can be used to block out light.

**Consult with your doctor.** Speak with your doctor if you believe you have insomnia. An evaluation for insomnia may include a physical examination, a sleep history, and a medical history. You also may be asked to keep a sleep diary for a week or two weeks.

**Your insomnia may cease.** Insomnia may only last for a couple of days and go away on its own. This especially holds true when the insomnia is related to an obvious temporary cause such as jet lag. Chronic insomnia, however, may be related to an underlying mental or physical problem.

This page is part of an ongoing series of practical tips for patients with neurologic disorders. If you have compiled clinically relevant tips that you wish to share, please contact the editor at info@neurologyreviews.com.

Tips for Patients are available for download at www.neurologyreviews.com.

