



# UNDERSTANDING AND HELPING POOR SLEEP

- In order to improve your sleep it is important to understand the many things that affect the quality of a night's sleep. You can then take a problem solving approach and make changes.
- Five key aspects about sleep are set out below, with each having different implications for what you can do to help your sleep. It is important that you see ALL five aspects as working together to improve your sleep.

Note: All words that are underlined relate to topics in the Sleep Health Foundation Information Library at [www.sleephealthfoundation.org.au](http://www.sleephealthfoundation.org.au)

## 1. Maximise your sleep drive

Your sleep drive (or pressure for sleep) is low in the morning when you wake up and rises steadily across the waking hours so that it should be high at bedtime. It is usually easiest to fall asleep when your sleep drive is high. Sleep drive falls while you sleep (either overnight or in a nap). So, if you sleep in for a few hours in the morning, have an afternoon nap, or go to bed too early in the evening your sleep drive might not be high enough to help you fall asleep and/or stay asleep.

- Learn to recognise whether you are *tired* or *sleepy* in the evening and only go to bed when you are sleepy.
- Most Australians sleep for between 7 and 8 hours at night. If you spend much longer than this in bed you risk being wakeful when you really want to be asleep. Your body will develop a habit of wakefulness before sleep onset, during the night or before getting up time. So limit your time in bed to no more than the total time you are likely to sleep, e.g. 8 hours or less.
- Understand that naps, or falling asleep in front of the evening TV, will reduce your sleep drive at bedtime.
- Try to stick to the same waking up time in the mornings, even on weekends.

## 2. Look after your body rhythm



Your body rhythm can be thought of as acting like a single wave that is high during the day and dips at night. Good sleep is more likely if the wave rides high during the day, helped by activity and exercise and getting good outdoor light. Morning light is especially critical, so consider breakfast by a window or outside. A strong dip at night is also important and this is helped by setting a regular sleep/wake routine and not spending more time in bed than your daily sleep need (e.g. 7.5 to 8 hours).

If you are a person who is very alert at night, can't fall asleep until the wee hours of the morning, sleeps well once asleep and then has real trouble getting up at a normal morning time, learn about Delayed Sleep Phase Disorder to see if it is the timing of your internal body clock, in relation to the times you expect to sleep, that is your problem.

## 3. Minimise internal disruptions of mind or body

Most disruptions that create poor sleep are internal to you and caused by your mind (mental disruption) or your body (physical disruption). One important physical disruption causing poor sleep may be a breathing problem. You may have pauses in your breathing during the night, normally due to a partial or complete blockage of your airways. You



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may or may not be aware of such pauses, but it will cause your sleep to be very light with frequent interruptions during the night. Bed partners are often aware of these breathing pauses, and they are often associated with snoring. This breathing problem during sleep is called obstructive sleep apnoea. If you think you may have this problem, ask your GP whether you may need a referral to a sleep specialist for an overnight sleep study. One of the ways of treating obstructive sleep apnea is a device called a Continuous Positive Airway Pressure machine (CPAP). It is important to treat sleep apnoea to improve your sleep and avoid cardiovascular and other health problems. Other internal physical problems interfering with sleep are the jerks associated with Periodic Limb Movement Disorder or the creepy-crawly sensation of Restless Legs Syndrome.

For many people their mind is too active to fall asleep, either at bedtime or when they have woken up during the night. This can be due to many different things.

- During the day and evening it is important to keep stimulants such as caffeine, nicotine and alcohol to a minimum. Each will act as a stimulant to keep you awake. Caffeine can take 24 hours to be eliminated from the body.
- It is important to have a buffer zone of 1-2 hours between any stimulating evening activities and going to bed. During this wind-down time ensure you turn off computers and similar electronic devices. Their light suppresses a hormone, melatonin, that helps you sleep. Undertake relaxing activities like watching pleasant TV programs, reading, listening to music, chatting, reading magazines, having a warm bath or shower, or drinking a warm non-caffeinated, non-alcoholic drink.
- Don't take your worries to bed. Choose a time earlier in the day when you write out your main worries and then some options for dealing with them (even if it is just to think about them later in the week). Then, fold the 'worry page' over and remind yourself when in bed that you will make time to revisit those worries the next day. Try not to worry about things you can't change or are not your problem.
- Once in bed have some strategies that help you turn your thoughts to relaxing things. You may create a calm imaginary place or imagine a wonderful holiday. Some people listen to relaxing audio files at bedtime. Try the free ones at [www.calm.auckland.ac.nz](http://www.calm.auckland.ac.nz) (select 'Downloads' link). Progressive muscle relaxation is especially helpful for sleep. It provides relaxation for both the body and mind. You can practice during the evening listening to the file and then do it on your own in bed when wakeful.

- Depression and ongoing anxiety will often create sleep difficulties and you may need to seek help on managing such emotional problems. Be sure your GP is aware of how these might be affecting you.

## 4. Minimise external disruptions

If you are a light sleeper or have trouble returning to sleep be sure you remove, reduce or avoid any persistent problems that could disrupt your sleep. This includes disturbances from pets, morning light too early, being too warm or cold, feeling unsafe or a partner snoring. Ear plugs, eye covers, better curtains, heating, fans or air-conditioning, night lights, door locks and separate bedrooms are all worth considering in dealing with these issues.

## 5. Develop a positive attitude to sleep

Many people don't realise that healthy sleep is NOT one big 'down-time'. Instead we have a rollercoaster of lighter and deeper sleep across the night and brief awakenings are a very normal part of a night's sleep. The key is really to get back to sleep within a reasonable time. Many people feel they spend a large part of the second half of the night being quite wakeful. We all have thoughts going through our mind continuously during sleep and studies have shown that many poor sleepers believe they are awake when they are really in light sleep.

- The more relaxed you are about being dozy and moving in and out of sleep, the more likely you are to move towards a better sleep.
- Think 'rest is good' and don't watch the clock. Be patient and don't expect too much – you can't force sleep.
- If you are lying awake feeling frustrated then get out of bed and do something relaxing until you feel more ready for sleep. Keep the lights dim.
- Avoid doing things in your bedroom that are not part of getting sleep. Don't regularly fall asleep in front of a TV while in bed. If you do, you will have trouble falling asleep again during the night without it.
- Don't think of yourself as having insomnia, instead focus on developing good sleep habits.

For information on over 60 different sleep related topics, written by professionals, visit the Sleep Health Foundation Information Library at [www.sleephealthfoundation.org.au](http://www.sleephealthfoundation.org.au). The underlined topics in this article are covered in detail there.



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### Sleep Health Foundation

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A national organisation devoted to education, advocacy and supporting research into sleep and its disorders.

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