

When Sleep is Disrupted

Sleep problems

People with dementia often have problems sleeping and experience changes in their sleep patterns. Some of these changes are part of normal aging. Many of the changes in sleep patterns are caused by the impact of dementia on areas of the brain that control sleep. Many people with dementia sleep more during the day and thus, can be more awake and active at night. They may also awaken more easily during the night. Some people have trouble telling the difference between night and day. These sleep problems often disrupt the caregiver's sleep. Many caregivers also report that they sleep poorly because they are worried and anxious. Sleep disruption can be stressful and burdensome for family caregivers, and we encourage caregivers to reach out for help.

There are **medical conditions** that can affect sleep. Depression and anxiety can cause early morning wakening, trouble getting back to sleep, and poor sleep quality. Restless legs syndrome is a disorder that causes unpleasant sensations in the legs causing the urge to move. Sleep apnea is a pattern of breathing that results in poor sleep quality. Acting out during sleep (for example, moving, hitting out, and vivid dreams) can disrupt normal sleep patterns. Illnesses, such as angina and congestive heart failure can affect one's sleep patterns. Anyone experiencing these symptoms should consult their health care provider.

Figuring out the cause(s)

It is important to try and figure out what may be causing the sleep problem. There may be multiple factors: the environment, the daily schedule, having a pet, the result of the dementia, and/or the types of medications being taken. Figuring out the cause is an important step in deciding how to manage or treat the sleep disturbance.

Sometimes it is helpful to keep a log or diary to see if there is a pattern to the sleep problem(s). For example, one caregiver slept in her mother's room and discovered there was bright light coming from a street lamp, and that the neighbor routinely started their noisy car early in the morning. Moving her mother to a quieter and darker bedroom helped them both get better sleep.

If you have insomnia, you may experience one or a combination of the following symptoms:

- Taking a long time (more than 30 to 45 minutes) to fall asleep
- Waking up several times each night
- Waking up early and being unable to get back to sleep
- Waking up feeling tired and not able to function well during the day

Managing and treating sleep problems

There are drug and non-drug approaches to the treatment of sleep disruption. Most experts encourage the use of non-drug strategies. Sleep medications are associated with a greater chance of falls and other risk factors. The following are strategies that can be used for the person with dementia and the family caregiver.



IF	THEN
You want to set the right environment	-Keep a regular schedule: go to bed and get up at the same time everyday
	-Try to exercise daily but not within three hours of bedtime
	-Make sure the temperature in the bedroom is comfortable (not too hot and not too cold)
	-Reduce liquid intake before bedtime
	-Try not to nap during the day; if you do nap, try to do so before 3pm and try to keep the nap short (about 20 minutes)
	-Keep the bedroom as dark and quiet as possible; use a nightlight if needed, but be aware that bright light disrupts sleep/wake patterns
	-Calm activities at the end of the day and before bedtime may help with sleep
	-Avoid violent movies or TV shows; strong content and images can be upsetting and can make it hard to relax
	- Be aware that changes in your environment, such as moving to a new home or having unexpected visitors can be disruptive and confusing for the person with dementia
	- Avoid alcohol and products that contain caffeine (tea, chocolate, or soda) and nicotine; these can cause overstimulation and interfere with sleep
	- Have access to daylight for several hours a day; exposure to light improves day/night patterns
	- For the person with dementia, avoid keeping their daytime clothing in view at night; this may be a cue that it's time to get up
IF	THEN
You are considering medications for sleep	-Always talk with your health care provider before using over-the-counter (OTC) sleep medicines; many of them can make confusion worse, and some common OTC medications (like Tylenol PM) contain Benadryl, which can actually worsen sleep and cause confusion in older adults
	-Ask your health care provider if any of the medication you currently take could be causing sleep disruption



- -If the person with dementia is taking a cholinesterase inhibitor (Donepezil, Rivastigmine, or Galantamine), avoid giving the medicine before bed; instead, give it in the morning
- -Be aware that medicines used to promote sleep carry risks for older adults and people with dementia, including imbalance and falls, fractures, and increased confusion
- Consider whether using a sleeping medication is appropriate; selective serotonin reuptake inhibitors (SSRIs) are a commonly used type of medicine (i.e., Trazodone)
- -Any time you are prescribed a new medication, make sure to ask your health care provider about possible benefits and risks; ask about other treatment options that may be available

IF THEN

There are other things to consider

- -Be sure to treat conditions that may be causing pain and discomfort; consider using an analgesic at bedtime if your health care provider agrees
- -Do not restrain a person with dementia to keep them in bed; this can create agitation and a desire to escape, and can lead to a fall or injury
- -Consider installing security alarms on doors and windows if there is concern that the person with dementia might wander from the house during the night; knowing that you have an alarm system may help you get better sleep
 - Refer to the Wandering handout if this is a concern
- -Consider using a bedside commode if getting up to the bathroom is causing sleep disruption
- -If you think being hungry at night is a problem, have a light snack just before bed
- -Use the toilet right before bedtime to help prevent nighttime waking
- -Consider hiring help in the home during the nighttime hours to help you, as the caregiver, get some sleep
- -There is evidence that meditation and mindfulness promote good sleep



References and additional resources:

1. Alzheimer's Association: www.alz.org

2. Alzheimer's Australia: fightdementia.org.au

3. Harvard Medical School, Division of Sleep Medicine: healthysleep.med.harvard.edu/healthy/getting/overcoming/tips

4. Sleep Health Foundation: sleephealthfoundation.org.au/files/pdfs/Dementia-and-Sleep.pdf