



Medical Observer – 1 October 2010

“The need for Sleep”

“Now there’s new evidence that getting too much or too little sleep could be a risk factor for Heart Disease in it’s own right.

Seven hours of sleep seems to be ideal, and any deviation from that in either direction shows increased risk. This suggests a dose-response relationship.”

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“Sleep Problems in Children and Adolescents”

“Sleep is generally undervalued by all of us. Children spend about 40% of their time asleep and adults spend 25%-30% of their lives asleep. It is a time when our brains lay down memories, produce the highest amount of growth hormone, and have the greatest variation in the regulation of sleep-breathing patterns.

Sleep can be a vulnerable time for periods of hypoxemia, which, in turn, will influence the capacity of children to concentrate and learn, and will likely adversely affect their behavior.

Taking a brief history of sleeping patterns and duration, as well as asking specifically about snoring in the course of a general consultation, in an efficient way to screen for common sleep-breathing problems in childhood.”

Key Points

- *While sleep requirements decrease with age, most children do not get an optimal amount of sleep; this is most evident in adolescents who tend to sacrifice sleep time for social activities.*
- *People are most vulnerable to develop sleep apnea during rapid eye movement sleep.*
- *While up to 15%-20% of young children will snore regularly, only about 2%-3% of all children have obstructive sleep apnea.*
- *Night terrors usually occur within two hours of going to sleep at night.*
- *Nocturnal hypoventilation is a feature of moderately severe neuromuscular weakness, chronic respiratory disease (such as cystic fibrosis) and children with a central disorder of respiratory control (such as with brain stem abnormalities).*
- *Sleep-phase problems are common and easily identifiable in teenagers.*

INSOMNIA TREATMENT PROGRAMME

A non-drug treatment for long-term sleeplessness

Insomnia

Insomnia is the most common sleeping difficulty reported by people of all ages.

Long-term insomnia causes significant distress and problems with daytime functioning in about 10% of the population.

The features of insomnia include:

- Difficulty falling asleep
- Difficulty staying asleep
- Un-refreshing sleep

Causes

There are many different reasons for insomnia. A pattern of poor sleep may start during a period of stress or through a situation interfering with sleep such as:

- Shift work
- Jet lag
- A new baby
- A snoring bed partner

Unfortunately, the poor sleep may be maintained even after the factors that started it are no longer a problem.

For people with long-term insomnia, research indicates that it does not usually go away by itself without active treatment.

Insomnia Treatments

There are many treatments for insomnia. The most common remedy for sleeplessness has been sleeping pills. However, there are problems associated with their use including drug dependence and side effects.

The Insomnia Treatment Programme

The Insomnia Treatment Programme uses non-drug approaches to treating insomnia, and makes available practical, scientifically supported treatments from insomnia research.

Treatment includes Cognitive Behavioral Therapy (CBT) which is an established treatment for insomnia helping clients to shorten the time they spend lying awake sleepless at night and improving their daytime functioning.

Research on CBT for insomnia has found that it addresses the factors maintaining long-term insomnia and produces more long lasting improvements than drug therapy. Other non-drug therapies (e.g. Bright light therapy) are also used for appropriate cases.