How to tell if you are sleep-deprived

On going to bed at night, a well-rested person will take 10-15 minutes to fall asleep, but a sleep deprived person will fall asleep within a few minutes. So if you fall asleep before you head hits the pillow, consider yourself sleep deprived. If you find yourself dozing off at concerts or plays or in the car, or cannot stay awake all day without caffeine, you are most likely sleep deprived. People generally have two especially sleepy times: what most people think of as bedtime (10pm to 12am) and mid-afternoon (2 to 4pm).

Experts estimate that 100 million Americans maintain a serious sleep debt by failing, night after night, to get enough sleep. They also say that most sleep deprived people do not realize just how prone to falling asleep at the drop of a hat they really are. It’s well documented that sleep deprived students perform significantly worse than students who regularly get a good night’s sleep. Deep (REM) sleep is particularly important for consolidating newly learned information, and a large proportion of REM sleep occurs towards the end of the night. So studying most of the night for a test, and then sleeping only a few hours, decreases your ability to remember new information.

General Rules to sleep by

- **Know how much sleep you need.** Most college students can “get by” on 4-6 hours most nights, but that is not the same as “need”. Most students actually need 8-9 hours, more than older adults. If you are sleepy during the day, you are not sleeping enough at night.
- **Try to sleep in a continuous block.** People need a long period of consolidated sleep; sleep broken by repeated awakenings leaves people unrested no matter how long they spend in bed.
- **Go to sleep at the same time every night and wake up at the same time each morning.** Trying to catch up on sleep by sleeping late the next morning disturbs your body’s sleep-wake rhythm.
- **Remember: sleep loss is cumulative.** If you take sleep out of the bank one or two nights, but sure to pay it back as soon as possible so your week’s sleep total is always stable.
- **To re-adjust a sleep schedule** that is causing chronic sleep debt, start going to bed 15-20 min- utes earlier each week. It may take 6-8 weeks to reschedule your bedtime so that you avoid daytime sleepiness.
● Get daily physical exercise, which results in more restful deep sleep and also decreases your total sleep need a little.

If you have trouble sleeping

● If you have frequent or periodic insomnia, as 1 in 3 people do on any given night, try these tips: take a hot bath before bed; read a book for pleasure; write down your worries and leave your notes on your desk; be sure your room is quiet, dark, and cool.
● If you toss and turn for more than 20 minutes at bedtime or during the night, get out of bed and do something else until you feel sleepy again.
● Naps should be less than 30 minutes. A 15-20 minute nap will increase alertness, productivity, and creativity. But napping for an hour or more will make you lapse into delta, or deep sleep, and wake up feeling worse.
● In anticipation of a late night or short night, take a nap beforehand to help prevent sleepiness the next day.

What about sleeping pills?

Sleeping medication may be prescribed by a doctor or bought over-the-counter. Short-term prescription sleep aids may be useful in some circumstances but prolonged use can lead to dependence and reduced effectiveness. Many over-the-counter sleep aids contain antihistamines to induce sleep and may result in residual drowsiness the next day. They are usually only effective for 2 or 3 nights. You can talk to a provider about whether sleep medications would be appropriate for you.

Caffeine, Alcohol and Sleep

● Although stimulants produce momentary feelings of alertness, they rob people of restful REM (rapid eye movement), or dream, sleep at night. Caffeine abuse results in restless, not restorative, sleep. The loss of REM sleep results in daytime irritability, anxiety, depression, lack of ability to concentrate and remember, and a loss of creativity. Remember that caffeine is found in cola drinks, tea, and many medications, as well as coffee. Caffeine effects peak in 1 hour; caffeine is eliminated from the body in 3 to 7 hours. Avoid stimulant foods and beverages for 8-10 hours before sleep.
● Alcohol is very disruptive to normal sleep patterns and should not be used within 3 hours of bedtime.

If snoring is a problem

Significant snoring, gasping, snorting, or abrupt awaking can be signs of sleep apnea, which is strongly associated with interrupted, poor sleep and daytime sleepiness. Talk to your provider if you have concerns about possible sleep apnea symptoms.

Otherwise, the American Academy of Otolaryngology Head and Neck Surgery offers the following tips for snoring:

● Exercise daily to develop good muscle tone and to lose weight.
● Avoid tranquilizers, sleeping pills, and antihistamines before bed.
● Avoid alcoholic drinks and heavy meals within three hours of bedtime.
● Sleep on your side.
• Tilt the entire bed with head upward (by putting steady boards or 1-2 inch blocks under the legs at the head of the bed).

What else can you do to Improve Sleep?

• Establish a sleep ritual which will facilitate relaxation. You need to wind down a bit before trying to sleep. Don’t expect to be able to study right up until bedtime.
• Spend a few minutes relaxing before going to bed. Try reading, meditating, stretching, knitting, etc. before bed. Be patient as it may take 2-3 weeks to establish a sleep ritual to promote regular sleep hours.
• Be sure your sleeping conditions are comfortable. A firm mattress is best for back support. Do you have adequate sleeping space, quiet, and a good temperature (cool is better)?
• A light snack may prevent night-time hunger, but avoid a heavy meal close to the sleep hour because being too full may make you uncomfortable.
• A warm, nonalcoholic, nonstimulant drink (i.e. herbal tea) may be soothing.
• Don’t exercise within 3 hours of bedtime, because exercise increases alertness and inhibits the ability to fall asleep.
• Avoid using your bed for non-sleep activities, such as studying.
• Avoid screens such as smart phones, computers, reading devices, “e-books” at bedtime. This is artificial light that is known to stimulate the brain and impair natural melatonin production.

• If you tend to worry about things while lying in bed, try writing down your worries and leaving your notes on your desk; or visualize and concentrate on a peaceful scene to prevent your mind from “whirling”.
• If you are unable to fall asleep in 20-30 minutes, get out of bed and do something quiet, such as reading, until you feel tired enough to return to bed.
• If you wake up in the middle of the night, resist looking at the clock. If you stay quiet you may fall back asleep more easily.

If your sleep difficulties do not improve after trying these behavioral modifications consistently, talk to your provider.

In some circumstances of prolonged severe insomnia referral to a sleep specialist may be helpful. Cognitive behavioral therapy (CBT) may also be indicated. CBT is a strategy that includes sleep education, sessions that focus on stimulus control and sleep restriction, cognitive therapy, sleep hygiene, and addressing potential future problems such as stress and relapse. It includes regular, often weekly, visits to a clinician who will give you a series of sleep assessments, ask you to keep a sleep diary, and work with you in sessions to help change the way you sleep.

Resourceful Websites: sleepfoundation.org and mayoclinic.org

For more information on sleep visit the BWell Health Promotion website at www.brown.edu/bwell.