

SLEEPING

This Help Sheet discusses some of the causes of sleeping problems and provides some suggestions for families and care partners to help manage this common, yet difficult problem.

Problems with sleeping are a common occurrence for people with dementia. Some people sleep during the day and are awake and restless at night. Some are no longer able to tell the difference between night and day, while others are simply not as active as they used to be and consequently need less sleep.

Causes of sleeping problems

It is important to try to recognize what may be causing the problem – is it the environment, the dementia or the medications used? This will help to decide on which strategies may be helpful. Some families and care partners find that keeping a log or diary may help them see the pattern of behaviors that may be developing, enabling the cause of the problem to be pinpointed.

Physiological or medical causes

- The brain damage caused by the dementia has affected the biological ‘clock’ in the brain which directs our sleep patterns.
- Illness such as angina, congestive heart failure, diabetes or ulcers.
- Pain caused by such things as arthritis.
- A urinary tract infection which causes a frequent need to urinate.
- “Restless legs” or leg cramps which can indicate a metabolic problem.
- Depression which may cause early morning waking and an inability to go back to sleep.
- Side effects of medication such as diuretics or antidepressants.
- Sleep apnea and snoring.
- Sleep patterns change as we get older. Some older people need more sleep, some less.

What to try

- Discuss with the doctor stopping or changing diuretic medication if you feel this may be contributing to the problem.
- Arrange a medical check-up to identify and treat physical symptoms.
- Treat pain with an analgesic at bedtime if the doctor agrees.
- Discuss with the doctor whether sedatives may be contributing to the problem.
- Ask the doctor whether an assessment for depression may be necessary.
- Ask the doctor about possible side-effects of medication.
- In some situations, it may be necessary to consider discussing with the doctor the appropriateness of either using tranquillizing medication or sleeping medication. The latter may be helpful in the short term to establish a better sleep cycle, but both types of medication can have negative effects, such as increased confusion.

Environmental causes.

- The bedroom may be too hot or too cold.
- Poor lighting may cause a person with dementia to become disoriented.
- They may not be able to find the bathroom.
- Changes in the environment, such as moving to a new home or having to be hospitalized, can cause disorientation and confusion.

What to try

- Keep the environment as consistent as possible.
- Check whether the person is too hot or too cold on waking. Dementia may affect their internal thermostat.
- Shadows, glare or poor lighting may contribute to agitation and hallucinations, so provide adequate lighting.
- Not recognizing self or others in a bedroom mirror may cause confusion. Moving the mirror may be helpful.
- Night lights might help cut down on confusion at night and may assist them to find the bathroom.
- If finding the bathroom is a problem, a commode by the bed might help.
- Make sure the bed and bedroom are comfortable. Familiar objects may help with orientation.
- Avoid having day-time clothing in view at night as this may indicate that it is time to get up.
- Try to make sure that they are getting enough exercise. Try taking one or two walks each day.

Other causes

- Going to bed too early.
- Sleeping too much during the day.
- Over-tiredness causing tenseness and an inability to fall asleep.
- Insufficient exercise so that they do not feel tired.
- Too much caffeine or alcohol.
- Feeling hungry.
- Agitation following an upsetting situation.
- Disturbing dreams.

What to try

Food and drink.

- Cut down on caffeine (coffee, cola, tea, chocolate) during the day and eliminate after 5pm.
- Cut down on alcohol and discuss with the doctor any possible interaction between alcohol and medication.
- If you think the person may be hungry at night, try a light snack just before bed or when they first wake up.
- Herbal teas and warm milk may be helpful.



Daily routines.

- Try not to do any tasks that may be upsetting in the late afternoon.
- If the person is refusing to go to bed, try offering alternatives such as sleeping on the couch.
- In some situations, it may be necessary to consider discussing the appropriateness of either using sedative medication or sleeping medication with the doctor. If the person wanders at night, consider allowing this, but check that the house is safe.
- Try a back rub before bed or during wakeful periods.
- Try a softly playing radio beside the bed.
- Gently remind the person that it is night-time and time to sleep.

Other considerations

- Problems with sleeping or late evening agitation are often a stage in dementia that eventually passes. Many people with dementia sleep more during the latter stages of the condition.
- Sleep problems are amongst the most difficult symptoms of dementia. Families and care partners must be able to get adequate sleep themselves. Try to ensure regular periods of rest and regular breaks for yourself, as well as for the person with dementia.

FURTHER INFORMATION: locally call Dementia Friendly Wyoming 307-461-7134 or visit our website <http://www.dwfsheridan.org> or The Sheridan Senior Center 307-672-2240. Nationally contact the Alzheimer's Association at 1-800-272-3900, or visit their website at <http://www.alz.org>.