



INSOMNIA

Are You Getting Enough Sleep?

Written By: **Emma Torneiro**

Did you know we spend roughly 1/3 of our lives sleeping? However, this fact is true only if we're sleeping eight hours per night, which is, unfortunately, uncommon for many individuals impacted by Parkinson disease due to the variety of sleep issues associated with the disease. One of the most reported sleep disorders is insomnia. The prevalence of insomnia in those diagnosed with Parkinson's is higher (affecting up to 80% of people with Parkinson's) than the general public, with occurrence increasing as the disease progresses.

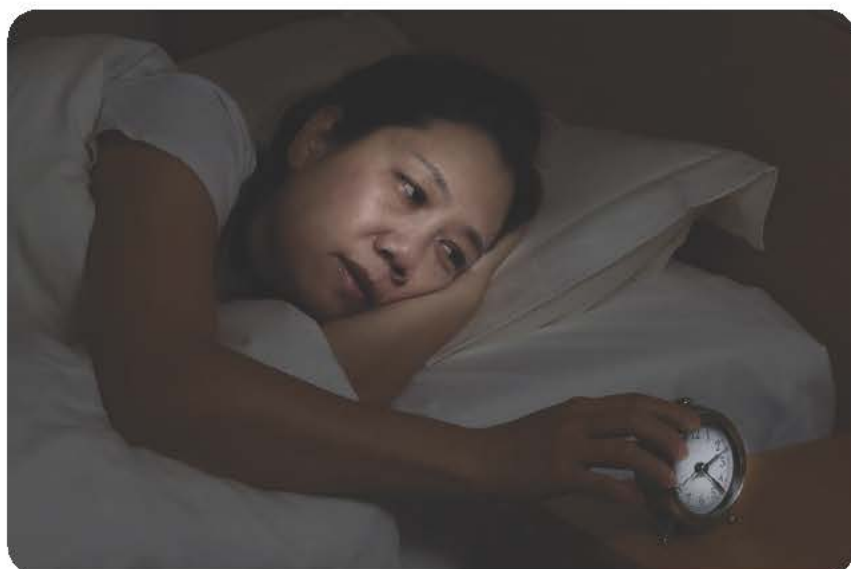
Insomnia defines a sleep disorder characterized by the inability to sleep due to one of three issues:

- » difficulties falling asleep,
- » frequent waking leading to fragmented sleep, or
- » waking too early leading to insufficient amounts of sleep needed for daily functioning.

The type of sleep disruption categorizes the three (3) levels of insomnia:

- » **Initial** or **Sleep Onset** refers to trouble falling asleep,
- » **Middle** or **Maintenance** refers to frequent waking with the ability to return to sleep, and
- » **Late** or **Early Waking** refers to inability to fall back asleep after waking early.

For those diagnosed with Parkinson's, the causes of insomnia can stem from the chemical changes occurring within the brain, the duration and progression of the disease, gender (female), the prevalence of depression or anxiety, side effects of medications (amantadine and MAO-B inhibitors like Selegiline or Rasagiline), the inability to sleep due to motor symptoms (rigidity or dystonia) or autonomic dysfunction symptoms (ex. nocturia), inability to sleep due to vivid dreaming or REM Sleep Behavior Disorder, or other undiagnosed sleep disorders (ex. sleep apnea).



A lack of sleep from insomnia can increase fatigue levels throughout the day leading to feeling exhausted, sleepy, or unwell. Additionally, insomnia can cause delayed cognitive processing and responses, difficulties with memory, and significant mood disruptions thereby impacting day-to-day functioning. When thinking about the effects of insomnia, one may notice the overlap of symptoms with Parkinson disease progression. For example, Parkinson's on its own can cause fatigue and changes to cognitive functioning; the effects of insomnia can create added difficulties, so it is important to try to manage these symptoms to ensure consistent good rest to help you successfully navigate the disease.

Since we know how important the connection between good sleep and daily functioning is, you might be wondering how insomnia is diagnosed and what treatment options are available. A diagnosis

of insomnia is based on self-reported symptoms to your healthcare team and can include sleep studies to rule out additional sleep disorders. The diagnosing characteristics of insomnia include sleep disruptions occurring regardless of external circumstances, such as lifestyle changes or events causing stress, and a frequency that is consistently 3x per week for three (3) months.

Treating insomnia can take time and it is important to consult with your healthcare team regarding any medication questions or changes for management of Parkinson's and insomnia. One treatment option for managing insomnia would be requesting an assessment with your neurologist or healthcare team to discuss your Parkinson's medications – considering the timing, dosage, or possible removal of medications causing insomnia as a side effect. The adjustment of medication schedules or types of medications (ex. long acting or controlled release) could help with the management of motor symptoms overnight, which would result in better quantity and quality of sleep. If your healthcare team deems applicable, they may recommend natural sleeping remedies (ex. Melatonin) or prescribe sleep aids to use with caution to manage the symptoms of insomnia. It is also important to consult your healthcare team for medical or therapeutic management of mood disorders, specifically depression and anxiety, which can increase your risk factor for insomnia.

Additionally, your healthcare team could request a sleep study to understand sleeping patterns and determine if other sleep disorders exist that could be treated. Finally, the treatment of insomnia can include lifestyle changes to improve quality and quantity of sleep, including reducing naps throughout the day or limiting naps to 45 minutes or less in the early afternoon, creating a sleep hygiene routine to follow, and getting out of bed when you're unable to sleep and returning when you're feeling tired again.

Finally, if this article made you sleepy (*I won't be offended if it did*), read this every night before bed!