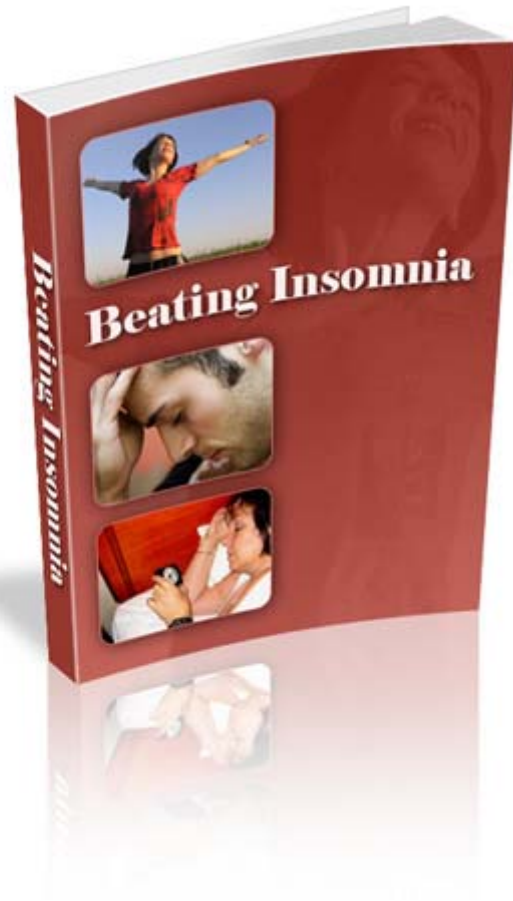


# Beating Insomnia



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## **Introduction**

It should be a very simple thing to go to sleep. How complex should something be that is an innate ability? It shouldn't take much effort at all. It's an inborn ability, along with other certain bodily functions. When we're newborns, we can eat, sleep and wet the bed. Our automatic functions continue throughout our lives.

So you should just be able to close your eyes, relax and you are off to dreamland. But this is not an option for many, many people. Sleep doesn't come as easy as that.

There are approximately 60 million people who suffer from insomnia. These are statistics from the U.S. Department of Health and Human Services and considered accurate. When you break that down, that means insomnia affects approximately 40 percent of all women and 30 percent of all men.

This condition seems to drive some people to the edge of madness, as they fight to get enough sleep. The effects can be devastating to those afflicted, and as F. Scott Fitzgerald once wrote, "The worst thing in the world is to try to sleep and not to." There are so many with the affliction that sleep clinics have sprung up all over the country in an effort to help.

Overcoming insomnia may not be easy, but there is hope. Inside this book, we are going to explore the subject in depth to help you get a good night's sleep!

# Chapter 1

## *What is Insomnia?*

Insomnia is basically an inability to sleep and/or to remain asleep for a reasonable period. It gives the feeling of daytime fatigue and impairs normal performance. People with insomnia can't sleep despite being tired, and when they do sleep, it's a light, fitful sleep that leaves them tired when they awake. Sometimes they simply wake up too early.

Here are common symptoms:

- Frequent headaches
- Irritability
- Lack of concentration
- Sleeping better away from home
- Taking longer than 30 or 40 minutes to fall asleep
- Feeling tired and not refreshed upon waking
- Waking repeatedly during the night
- Waking very early and not being able to fall back to sleep
- Only being able to sleep using sleeping pills or alcohol

Insomniacs could be the product of our stress-filled society. It is common knowledge that those with insomnia complain of being unable to close their eyes or rest their minds for any length of time. Often, they are plagued with problems and to-do lists that never got done, worries and concerns that float around in their mind.

Some may only have insomnia for a few nights running, but sometimes it lasts longer. In fact, the affliction is often categorized by how long it lasts. Here are the different types:

- Transient insomnia lasts for a few days.
- Short-term insomnia lasts no more than three weeks.
- Chronic insomnia occurs when a person has difficulty falling asleep, staying asleep, or experiences non-refreshing sleep for at least three nights a week for one month or longer. Normal daily functioning is usually impaired.

When insomnia is the sole complaint of a patient it is considered Primary Chronic Insomnia. But there are also secondary disorders such as:

Sleep apnea - A sleep disorder caused by difficulty breathing during sleep.

Restless Legs Syndrome - A sleep disorder characterized by unpleasant sensations in the legs or feet. These can be a creeping sensation, a burning, itching, or tugging feeling. Moving the legs around seems to relieve it.

Sometimes certain drugs and medications can create sleep disturbance. This can happen either when taking the medication or while withdrawing from it.

When a person has some emotional difficulties, he can have trouble sleeping. If you find that when you go to bed and lay there worrying about numerous matters or if you are extremely sad or have a loss of interest, and this goes on for a number of weeks, you should consult your physician. Sometimes insomnia is defined as an inability to sleep at conventional times. There is a condition where people fall asleep very late at night or in early morning hours, but then they sleep normally. Or sometimes, as occurs with older people, they have excessive sleepiness in the morning or awaken very early in the morning.

It might help to look at the basic sleep patterns. Doctors use common patterns to identify specific problems.

### **The Sleep Cycle**

Just as basic as food and vital to both emotional and physical well being, sufficient sleep is a basic human need. And it has been found that sleep comes in cycles, on a daily rhythm. You have heard this referred to as the biologic clock. It's the daily cycle of life, which includes sleeping and waking.

The sleep-wake cycles in humans, per scientific study, are shown to be sparked by light signals coming through the eyes. The response to these light signals in the brain is an important factor in sleep and also in keeping the normal rhythm.

The approach of dusk each day prompts the *pineal gland* in the body to produce the hormone called melatonin. Experts believe that this hormone is critical for the body's time sense. Levels of melatonin increase in darkness and the levels drop after staying in bright light. In proof of these researches, it has been found that people who are totally blind often have trouble sleeping and have other body rhythm problems.

Daily rhythms can get interference or be changed by individual patterns. The monthly menstrual cycle can shift the pattern of sleeping and waking in women. Changes in season can unsettle the sleeping pattern.

Sleep consists of two separate stages, and understanding these is all part of understanding the sleep cycle. A person progresses through each of these stages about five or six times each night.

The first is called Non-Rapid Eye Movement Sleep (Non-REM). Also called quiet sleep, it is further subdivided into three stages:

- Stage 1 (light sleep).
- Stage 2 (so-called true sleep).
- Stage 3 to 4 (deep "slow-wave" or delta sleep).

Rapid Eye-Movement Sleep (REM) sleep is called active sleep. This is where most vivid dreams occur. REM-sleep brain activity during REM-sleep is comparable to brain activity in awake time, but the muscles are as if paralyzed. These phenomena could possibly be a protective mechanism of the body that prevents people from acting out their dreams.

All this appears to be pretty simple and easy to understand, but why do some people have problems with these cycles?

### **What Causes Insomnia?**

There is no one reason why some have insomnia and others don't, but most experts do agree that it is often brought on by stress and anxiety.

Short-term insomnia, which is the most common, can be caused by many factors. Sometimes taking certain medications interrupts normal sleep. When you suspect your medications are causing you to lose sleep, you should check with a physician or pharmacist.

Caffeine often disrupts sleep, as we all have experienced at one time or another. Even nicotine can cause wakefulness and quitting smoking can also be a cause of short-term insomnia.

Depending on the time of day too much or too little light can disrupt sleep. There are many different causes. Another common cause can be a person's reaction to change or stress.

Sometimes a major or traumatic event sparks an occurrence. Examples could be:

Injury or surgery

The loss of a loved one

Job loss

Some develop temporary insomnia after a relatively minor event, like extremes in weather, an exam at school, trouble at work or even just traveling. In most of these cases, when the condition resolves, normal sleep returns.

Treatment is usually resorted to when the sleepiness continues for more than a few weeks or interferes with the person's normal functioning. A full physical would be in order to see if there is some illness at the bottom of the problem.

We should also be sure to address hormones, as they seem to play a major role in insomnia in women. Although such insomnia is most often temporary, it can certainly play havoc in someone's life. During menstruation, the level of a certain hormone (progesterone) plunges, causing insomnia. It's been shown that during pregnancy, this same hormone changes within the body greatly in the first three months and the last three months and that insomnia often results. The same is true for menopause. But when you find a woman with chronic insomnia after the age of 50, it is likely due to other causes.

Chronic Insomnia is another story. It seems to have more deep-seated roots. But it can be a mixture of reasons.

A large percentage of chronic insomnia cases prove to have some sort of psychological basis. Most often, the cause of insomnia is anxiety and depression. But it should be noted that insomnia may itself cause emotional problems, so it is often unclear which condition triggered the other, or if they both have a common source. Evidence exists in a national survey by the US Department of Health and



Human Services. They found that 47 percent of those reporting severe insomnia also reported feeling a high level of emotional distress.

Pain and discomfort from an injury, illness, or disability can also impair sleep. When people are in pain or sick, they generally have medication to help them through the uncomfortable symptoms. Unfortunately, many of these medicines can also cause insomnia to come about or even to get worse.

Other causes have been shown to contribute to insomnia such as substance abuse, working on a shift such as all night shifts at work, high levels of stress hormones and imbalance in hormones. The normal aging process has been known to cause insomnia, possibly due to hormonal changes. There may also be a genetic link.

So, yes, many various factors contribute to this malady, but who suffers from it and does it affect some more than others?

### **Who Has Insomnia?**

Studies have estimated that around one-third of all American and European adults have some insomnia during each year. About 10% or 20% of them suffer severe sleepless problems. It has also been shown that many (about 90%) who have depression suffer from insomnia.

Individuals who have physical complaints, such as headaches and chronic pain with no identifiable cause also complain of insomnia. One study took place where patients who had these complaints were treated for a sleep disorder only and over 65% of those treated said that their headaches were cured.

Others who may suffer from insomnia are those who travel frequently, particularly those who cross time zones in their travel, and people who have post-traumatic stress syndrome.

## **How Serious is Insomnia?**

Most everyone with insomnia complain of attention and memory problems. They also experience more irritability, make more mistakes on the job, and have poorer relationships with their family than people who sleep well.

In addition to more daytime sleepiness, insomnia can affect your waking behavior. You may have reduced concentration, perform tasks less adeptly, have a poor learning curve. Where stress and depression can cause insomnia, it has been shown that stress and the effects of it on the body can actually *produce* emotional problems.

In the US, there are around 1,500 deaths from accidents caused by falling asleep at the wheel. In fact, per some studies, driving when drowsy is as risky as drunk driving.

But rest assured, insomnia is virtually never lethal except in rare cases. There is one genetic disorder called fatal familial insomnia. In this rare degenerative disease, the individual develops severe and unmanageable insomnia, which eventually becomes fatal.

Insomnia definitely takes its toll on the body and lack of sleep does a lot more than make us tired. It can even result in serious health problems. While there are many signs to watch for to judge if you have insomnia, you may need professional help to fully determine if you are suffering from insomnia.

## **Diagnosing Insomnia**

It's important to diagnose the cause of any sleep disturbance in order to restore healthy sleep. Unfortunately, there is not much agreement, even among experts, on the best methods to assess a person's insomnia.

Some difficulty is presented by the nature of insomnia, such as its subjective nature. There are those who think they have insomnia where in actual fact, they are only having brief awakenings and only think they are continuously awake. If a person is suffering from daytime fatigue and impaired concentration and memory, however, the chances are good that their problem classifies as insomnia.

Questionnaires have been developed for the purpose of determining whether someone has insomnia or other sleep disorders. Your physician may ask a number of questions like how you would describe the sleep problem, how long it's been going on, if you have trouble getting to sleep or in waking up early or the like. He may want to know if you take medications or are withdrawing from stimulants, such as coffee or tobacco.

Sometimes it may be suggested that you keep a sleep diary. In this diary, you would record your sleeping habits, including any information from a bed partner who can observe you first-hand.

Every day for two weeks you should write down the following in your sleep diary:

- The time you went to bed and woke up
- Your total sleep hours
- The quality of sleep you feel you got
- What you did during the times that you were awake
- How much caffeine or alcohol you had and the times you had them
- What kinds of food and drink you had and times of consumption
- Your feelings, such as whether you were happy, sad, had stress, etc.

- Any drugs or medications taken and when.

There are other tests you might be given, such as something called a Multiple Sleep Latency Test. This test (MSLT) uses a machine that measures the time it takes to fall asleep lying in a quiet room during the day. It has limitations, however, and is usually used after other sleep disorders have been ruled out.

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But, in cases where a physician is unable to help, even with the tests he can perform, you may be referred to a sleep disorder clinic. There they will attempt to diagnose and treat your problem.

## Chapter 2

### *Sleep Disorder Clinics*

Sleep disorder clinics are designed to diagnose sleep disorders and give you ways to overcome insomnia. It might be intimidating to think about going to a clinic and trying to sleep with others watching you, but this is one specific reason these clinics succeed in finding answers.

Once it has been determined that you should attend such a clinic, you may wonder what to expect. Basically, you will be participating in a sleep study test that records your physical state while you sleep and through the various stages. In this way, the technicians (or sleep specialists) can evaluate your specific complaints and check your blood oxygen level, muscle tone, heart rate, and all other general sleep behavior.

Follow all instructions from the clinic personnel regarding preparing yourself for the test. This may include limiting coffee intake and such things. Which brings up what you should bring with you when you go in for testing:

- Nightgown, pajamas or any comfortable sleep wear
- Your favorite pillow or blanket
- Toiletries
- A change of clothes
- Any medications you normally use
- A book, magazine or other reading materials

Be sure to remove any nail polish and artificial nails and don't wear any make-up. This leaves a clean surface for any equipment that may be attached to monitor your sleep. On the day of the test itself, wash and dry your hair. This aids in preventing the electrodes that will be attached from sticking to your scalp.

Don't let the fact of so many attachments of equipment scare you. Surprisingly, it has not proven to make it difficult to sleep and the tests to go forward.

Once you are changed and ready to get into bed, you will have electrodes placed in specific areas. They are applied with easily removed glue and tape. These record brain waves, muscle movement, eye movement during sleep and other factors. A microphone will be attached to your neck to record snoring or other sounds you make while sleeping.

Despite the fact that you will be observed on a television monitor while you sleep, after the lights go out, very few patients say they have trouble falling asleep.

In the morning when you are awakened, all the equipment is removed. Then you will go and make an appointment with a sleep specialist to review the results of your tests.

Based on the results, and with the help of your sleep specialist or doctor, treatment will be recommended. It depends on the type of disorder you are having, but there are many solutions.

### **Medications That Can Help**

There is significant concern about using medications for treating insomnia. Medication does not address the root of the problem, and ends up becoming a crutch to lean on rather than a cure. Sleep medication should only be used as a very temporary aid for sleep problems.

Some of the concerns about using over-the-counter medications as well as prescription sleep medications are that people will develop drug dependence. There can be very detrimental physical side effects, or interactions with other drugs or chemicals in the body.

There are non-drug techniques that actually cure insomnia, but the prolonged use of sleeping medications will only result in a dependency. In 2002, a study reported lower survival rates in people taking sleeping aids.

Those who experience sleep problems always seem to want a quick fix. Most of the treatments that are successful require a lot of time and attention on the part of the insomniac. But the reality behind the use of sleeping aids is that they really don't solve the problem. They often make it worse in the long run.

The drugs used to improve sleep patterns are called hypnotics. The most common ones that doctors prescribe are called benzodiazepines. They were developed initially to treat anxiety. But be warned, side effects are to be expected. They can increase depression, have a very high rate of daytime drowsiness, and have an increased risk for automobile accidents and falls in the elderly. Memory loss, sleepwalking, and other odd mood states have been reported after taking Halcyon and other short-acting benzodiazepines. Pregnant women or nursing mothers should definitely not use them as birth defects can result. In some cases, overdoses have resulted in death.

Because this medication can be highly addictive, when you stop taking it, you will have some withdrawal symptoms. This can include a disturbed heart rhythm, sweating and gastrointestinal distress. Hallucinations or seizures are not unknown. Although all side effects are not covered here, they are an important factor to reckon with in your decision as to whether you should use them or not.

Of course there are many over-the-counter preparations available to help in your transient insomnia, but most of these sleep aids use antihistamines. The products referred to here would be such as Nytol, Sleep-Eez, or Sominex. Pain relievers such as Exedrin P.M or Tylenol P.M. also contain antihistamines. Most of these can leave you drowsy the next day. They aren't usually very effective in

providing restful sleep. And of course, there are the side effects that can include dizziness, blurred vision, and daytime sleepiness, which can lead to other problems. In truth, over-the-counter sleep medications are not a good idea.

Some medications on the market do not contain benzodiazepines and are shorter acting. Examples are Ambien and Sonata. However, there will be some side effects that can occur even with these. Watch for nausea, dizziness, agitation and headache. Rare fatal overdoses have been reported. Always read the warning labels.

Chloral hydrate has reportedly been a reliable medication but it does have significant adverse effects. Many experts believe it should not be used at all in the treatment of insomnia. It poses a risk for addiction, and side effects include irritation of the skin and mucous membranes. It has carcinogenic properties and can harm genetic material.

So having covered the dangers in the “quick-fix”, let’s look at some natural ways to help you sleep.

### **Natural Cures for Insomnia**

Many people use natural remedies for treating their insomnia. There are many which are completely harmless for most people, such as chamomile tea or lemon balm. Studies report positive benefits from herbal remedies and as long as you choose the high-quality products on the market today, you are safe. It needs to be noted that sometimes the products you want are not really what is being marketed to the public regarding that product. Some so-called natural remedies were discovered to contain standard prescription medication.

Because natural remedies are not regulated, their quality is not fully controlled. You just have to be cautious in what you are buying. Just because something is labeled “natural,” it doesn’t necessarily mean it’s 100% so.



Herbal remedies have been used for years in treating all sorts of ailments, including sleep problems. Many studies suggest valerian is helpful for insomnia. There can be side effects of vivid dreams, and you don't want to take high doses as you could experience blurred vision, some excitability as well as changes in heart rhythm. Studies conducted on the safety of this herb have been inconclusive, as many conditions were not regulated at the time, so no definite proof was forthcoming.

Chamomile, St. John's Wort and passionflower have been used for insomnia for many years. Also lemon balm has proven effective. Studies have shown that kava kava has helped to improve stress-induced insomnia. Sometimes dizziness has been a side effect reported from use of this herb. Also to be noted is that in some cases, kava kava has been associated with liver failure. It interacts dangerously with certain medications like anti-anxiety drugs.

L-tryptophan is an amino acid and is released when milk is heated. Perhaps this is where the remedy of drinking warm milk originates. It is shown to promote well-being and healthy sleep.

Another remedy is Melatonin, a well-studied natural remedy for insomnia, currently classed as a dietary supplement. Some studies found that although you may fall asleep faster with this remedy, it may have no effect on total sleep time or the daytime feeling of sleepiness. It has been studied and found that melatonin may help prevent jet lag.

To be noted here, it is suggested that 0.3 mg could be the most effective dosage for people with insomnia and that higher doses (3 to 5 mg) may make some stay awake. High doses also have been linked to drowsiness, headaches and nightmares.

There is a warning that should be made here for people trying to cure insomnia: In trying Chinese Herbal Remedies, it should be taken into consideration that up to 30% of herbal patent remedies imported from China have been found laced with potent pharmaceuticals. One study said there were a significant percentage of such remedies that contained toxic metals.

Many natural remedies assist greatly in helping you beat insomnia. But there are also some other great therapies that you can use to help you get the sleep you need.

### **Sleep Hygiene**

What is sleep hygiene? It is having good sleep habits, following conditions that promote sleep. Things that would not be good sleep hygiene would be habits like drinking alcohol or coffee in the evening. These are the things that make it difficult for you to get to sleep.

This remedy should actually be your first line of attack. Handling insomnia in this way has proven to be effective in changing sleep patterns. By reviewing and making some changes in your routine, you can improve your sleep.

These are some effective sleep hygiene habits:

- 1) Put yourself on a schedule with a regular time for going to bed and getting up and stick to it even on weekends.
- 2) Don't spend excessive time in bed; use the bed for sleep and sexual relations only.
- 3) Avoid naps.
- 4) Exercise before dinner. You'll find sleep then comes more easily. Don't exercise close to bedtime.

- 5) About an hour and a half or two hours before your bedtime, take a hot bath.
- 6) Keep the bedroom relatively cool and well ventilated.
- 7) Eat light meals before bedtime.
- 8) Avoid fluids just before bedtime.
- 9) Avoid caffeine or other stimulants 4-6 hours before sleep.
- 10) Don't drink alcohol before going to bed.

If you can't sleep -- don't stay in bed. Get out of bed, do some quiet light activity in dim light then return to your bed when you feel tired. Sleep hygiene is an effective technique you can benefit from in your fight against insomnia.

### **Stress Management and Relaxation**

You can manage stress and learn to relax by following some simple exercises. Practicing these exercises will help you fall asleep more quickly. You can also use them when you wake up in the middle of the night.

Start winding down about an hour before bed by trying these methods of relaxation:

- Read a book
- Take a bath
- Play solitaire
- Do a crossword puzzle.

Then there are more detailed exercises you can do, like Progressive Muscle Relaxation which is a set of exercises to reduce anxiety and stress. PMR is a

two-step process. It takes a little time to learn, but try it. You will get a quick course on it in the next chapter.

Another exercise helps you learn to breathe slowly and deeply. It is called Diaphragmatic breathing and it's a good way to slow down. To give this a go, simply put your hand on your stomach, take slow breaths. Let your stomach expand as you breathe in and relax your chest and shoulders as you breathe out. As you do this, keep your mind away from stressful thoughts.

Here's another. Practicing visual imagery is the practice of choosing peaceful, soothing thoughts to focus on. Doing this calms you and lets you stop thinking of all the things you have pending in your life. You can think of things that make you happy and relaxed, such as taking a walk in the forest, boating on a lake, talking with someone you love. As long as the image doesn't excite your mind, you will find yourself relaxing.

Managing stress can be something you teach yourself to do. If you can, you should come up with solutions to the problems you face. If you can't go out and handle them right now, you can at least write down the things you will do in the future. When there are situations that you know you can't possibly change, you can resolve to accept that things are how they are. Allow time to do the things you need to accomplish. This includes meals.

Try to live in the present and not spend time worrying about the past or the future. Talk to your partner if you are experiencing problems in your relationship. Don't get into any arguments, however.

If you find you are angry much of the time, you can deal with it so it doesn't keep you up at night. If the thing that is making you angry is solvable, take steps to do so. If not, realize you can't change it and move on. Talking about it or writing it down in a journal sometimes helps.

An important factor in managing stress is to give yourself a break. Take some quiet time every day. Do your relaxation exercises regularly.

The good thing about these self-help strategies is that they aren't addictive and are usually effective. They are also less expensive!

Don't forget, changing your physical sleep environment can help too. Try placing a board under your mattress if it sags. Put your bed in a different position. Put up thicker curtains.

Avoid being kept awake by noise. Use earplugs. Try and change your attitude towards the noise, as sometimes it is not the level of noise that bothers you, but the way you feel about it.

Another way to work on alleviating your insomnia is to look into cognitive behavioral therapy.

### **Cognitive Behavior Therapy**

When we deal with sleep difficulties, it becomes important how we think about sleep. That is why part of your treatment should involve identifying your thoughts about sleep. It is good to replace these thoughts with positive thinking.

In Cognitive-behavioral therapy (CBT), the idea is to reduce a person's misconceptions about sleep and teach more positive sleep behaviors, including good sleep hygiene.

Sometimes sleep problems start as some isolated incident but then become chronic. One technique for examining your thinking is to consider alternative beliefs to those you have adopted in the past. You can determine which beliefs are best supported by actual information available to you.

An example of an issue you might address would be the feeling that it is extremely important that you get a good night's sleep. If you feel that a poor night's sleep will be a disaster, it is only going to generate more worry and anxiety, making sleeping that much more difficult. You can challenge this thinking and simply consider other considerations that will reduce the all-encompassing importance of sleeping. Think that "It's no big deal" or "I'll be a little tired and cranky tomorrow but that won't be anything I can't handle.").

When you try to force yourself to sleep, you are only putting pressure on yourself and this just will make your sleep worse. Just focus on what you can control, like your schedule and sleep hygiene, and you will be able to fall asleep and stay asleep.

Doing this practice of challenging these old thoughts and replacing them with new thoughts may take some practice, but in so doing, you will get the old thoughts away from how they seem typically automatic and change your patterns.

## Chapter 3

### *Progressive Muscle Relaxation*

Progressive Muscle Relaxation is one of the simplest techniques for relaxation. It teaches you to relax your muscles with an easy two-step process. When you realize that physical relaxation brings mental calmness, you will understand why this works.

First you should consult with your physician for if you have a history of serious injuries, back problems or other muscular problems, doing these exercises can exacerbate pre-existing conditions. If you do these procedures against your doctor's advice, you do so at your own risk.

The two steps in this self-administered procedure are deliberately tensing muscle groups, then releasing the induced tension. Once you learn the procedure, you should spend 10 minutes a day practicing a shortened form of the routine to say in practice. For the first week, it is recommended that you practice the full routine twice a day before moving on to the shortened form.

When you practice, it's wise to follow these suggestions:

- 1) Practice in a quiet place with no distractions, not even background music.
- 2) Wear loose clothing
- 3) Remove your shoes
- 4) Don't drink, eat or smoke right before practice

- 5) Never practice this while under the influence of alcohol
- 6) Sit in a comfortable chair or lying down in bed
- 7) Get up slowly so you don't experience a drop in blood pressure and thus feel faint.

You will be working with virtually all the major muscle groups in your body. You should start from your feet and work upwards. Here is the sequence recommended:

- 1) Right foot
- 2) Right lower leg and foot
- 3) Entire right leg
- 4) Left foot
- 5) Left lower leg and foot
- 6) Entire left leg
- 7) Right hand
- 8) Right forearm and hand
- 9) Entire right arm
- 10) Left hand
- 11) Left forearm and hand
- 12) Entire left arm
- 13) Abdomen
- 14) Chest
- 15) Neck and shoulders
- 16) Face
- 17) Begin with your left side if you are left handed

Here is the procedure:



**Step One: Tension.** Focus your mind on the muscle group; for example, your right hand. Then inhale and simply squeeze the muscles as hard as you can for about 8 seconds. For example, if you are working with your right hand, this would involve making a tight fist with your hand.

It may seem difficult to learn to take responsibility for your body's mechanics, and beginners have a hard time allowing muscles in the intended group to tense. But you will become better with practice. For now, do the best you can. This is all part of the overall PMR learning process. You will become skilled at recognizing the fine muscles as distinct from the rest.

It's important to really feel the tension. Sometimes the procedure will cause the muscles to start to shake, and you will feel some pain. Don't hurt yourself. Always contract the muscles in your feet and your back carefully; i.e., gently but deliberately.

**Step Two: Releasing the Tension.** This is fun because it is so pleasurable. After the 8 seconds, just quickly and suddenly let go. Let all the tightness and pain flow out of the muscles while you simultaneously exhale.

You will be imagining tightness and pain flowing out of your hand through your fingertips as you exhale. Concentrate to feel the muscles relax. Feel them become loose and limp. Be sure to notice the difference between tension and relaxation. You are focusing on learning to make very subtle distinctions between muscular tension and muscular relaxation.

Stay relaxed for about 15 seconds. Then you will repeat the tension-relaxation cycle.

Once you have the above down, and you have more of an understanding of the muscle groups and the procedure, you are ready to begin the full PMR training.

Follow the list of muscle groups in the sequence below. Work through your entire body. Practice twice a day for a week. Once you achieve a deep sense of physical relaxation; then you can move on to the Shortened PMR schedule.

In the shortened version, you'll be working with summary groups of muscles rather than individual muscle groups, and begin to use cue-controlled relaxation. There are four summary muscle groups and these are the lower limbs; the abdomen and chest; the arms, shoulders and neck; and the face. You will focus here on the complete group.

**Cue-controlled relaxation:** In this procedure, you will use the same tension-relaxation procedure as in the full PMR, but you will work with the summary groups of muscles. You will also put more focus on your breathing during both tension and relaxation.

Inhale slowly as you apply and hold the tension. Then, when you let the tension go and exhale, say a cue word to yourself. Some suggestions for cue words/phrases include: "Relax," "Let it go," "It's okay," etc.

After you have practiced for about a week and twice daily, you will have enough proficiency to practice it under other conditions and with distractions.

You can then move on to the final process of Deep Muscle Relaxation. In this process, you use your imagination, starting at the top of your head and then working down through your body, and think of and then relax the various muscle groups using your cue word(s).

There are other approaches toward combating insomnia that can work well too.

### **Other Alternatives**

There are three other techniques that can help you improve your sleep habits. These are the following:

Stimulus control therapy comes from the idea that a person with chronic insomnia starts to associate bedtime and the bedroom with not being able to sleep. The whole idea of stimulus control comes into play by only using the bedroom for sleeping, nothing else. If you are awake, you leave the bedroom and go somewhere else. You will limit the time spent in the bedroom for any non-sleep activities.

Another approach is Paradoxical intention. Using this approach, you do the opposite of what you want or fear and take it to the extreme. Rather than trying unsuccessfully to go to sleep night after night, try to stay awake and do something instead. This is confronting the fear and hopefully, eliminating it.

Sleep restriction is based on the idea that people require different amounts of sleep. Someone with insomnia often stays in bed thinking that they will get more sleep, but this really is just increasing frustration and making sleep more difficult. In Sleep restriction therapy the amount of non-sleeping time a person spends in bed is reduced. The insomniac determines his average total sleep time for two weeks, then only spends the time he has spent sleeping on the average in bed each night. No TV for two hours before falling asleep.

Now, let's see how light affects the body's rhythm and how it can be used to help insomnia.

## **Light for Healing**

Light therapy is a treatment used for people who suffer from certain sleep disorders called circadian rhythm disorders. The word “circadian” means to occur in a cycle of about 24 hours.

This particular rhythm has to do with the function of darkness and light rather than the actual time of day. Circadian rhythms affect how you feel sleepy or alert at regular times every day. This, in conjunction with your internal clock, tells you when it’s time to be asleep and when it’s time to be awake.

People with a circadian rhythm sleep disorder have their natural sleep time overlap their regular awake activities. Your clock is “set” by your exposure to bright light such as sunlight. There are other factors as well, but this is the concept that Light therapy is based upon.

The goal is to combine a healthy sleep pattern with an internal clock that is set at the right time. Then good sleep can occur. Light therapy can “re-set” a clock that is not operating correctly. The procedure is very simple and safe, but a person should check with their doctor before embarking upon this therapy.

The person receives this therapy by sitting a few feet away from a box-like device that emits bright fluorescent light. He sits in front of the light, at a specified distance, for approximately 30-60 minutes after waking in the morning.

Timing of this therapy really depends on the type of insomnia of the individual. An example would be people who can’t sleep at night when they go to bed. Light therapy in the morning and restricting bright light at night may be helpful.

Bright light therapy can be done at home with the use of a light box. The light box emits a standard dosage of white light but should always be used within the proper limits for light intensity and duration of exposure.

Bright light therapy has not been known to show any major side effects.

Now we would like to review general tips to practice that can help with your insomnia.

### **Pre-Sleep and When You Are Awake**

There are certain suggestions that if you follow them, will help you get a good night's sleep:

- Keep a regular schedule
- Start having bedtime rituals, such as listening to soft music, etc.
- Relax before going to bed
- Don't eat a large meal before bed
- Have a bedtime snacks
- Write down your concerns and worries, or make a list of things you need to do the next day or in the near future
- When you are sleepy, go to sleep
- Avoid "over-the-counter" sleeping aids
- Eat some turkey because, like milk, it contains the amino acid tryptophan
- Don't do anything stimulating.

In our final chapter we will take a look at a common problem – sleep disorders in children.

### **Sleep Disorders in Children**

There's nothing more frustrating for a parent than a child who won't sleep or can't sleep or who sleeps irregularly. But there is something you can do to resolve this!

A very common sleep problem with infants, toddlers, and preschoolers is a disorder that stems from issues of the parent and child sleeping together. There are many children who insist on being nursed to sleep or on having a parent lie beside them until he or she falls asleep. Parents don't realize sometimes that these well-meaning habits have created a difficulty.

When the child awakens and finds the parent is not beside them, they may not be able to settle back into sleep. This can lead to frequent nightly arousals, unpleasant for both the child and the parent.

One way of solving this is to put the child to bed when he or she is drowsy but still awake. You need to, in other words, put the child to bed at a time that coincides with natural sleep onset rather than an arbitrary hour the parent has chosen as bedtime. Of course, most children protest when their bedtime routine is changed. But coping with any crying can be done if you maintain communication with your child, explaining what is happening in a soothing and comforting way. Talking in a slow, quiet voice to a child who is distressed or angry can help calm both the parent and the child. You don't have to go to the extreme of allowing infants to cry themselves to sleep. This is unnecessary and potentially harmful.

Nighttime snacks and drinks, with the exception of water, should be avoided, for obvious reasons. They can increase arousals in the night and also affect dental health.

Sometimes a child will be exposed to frightening media or other events, such as a death in the family or arrival of a new brother or sister. More severe stressors, can exist and which should be taken into account and explored.

Many problems can be settled with a child by giving them a small amount of extra attention and conversation at bedtime. You would, of course, keep it calm. No tickling fights.

Based on the same warnings that adults must pay attention to in taking medications, drugs are not recommended for children, even in very tiny doses. Children are much more resilient than adults and will respond well to lots of love and affection.

Sleeping problems are common among teenagers; where they may feel wide awake in the late-evening hours, not being able to sleep until 3 or 4 AM. Then at school, their performance is impaired. They may even fall asleep in the morning classes. Changing such a sleep cycle is a challenge, but likely can be accomplished by setting the morning wake-up time 15 minutes earlier each successive day until the desired target is reached. Accompany this by exposure to bright natural light.

## **Conclusion**

Insomnia isn't an unusual problem, and everyone experiences it at one time or another. But when it comes regularly or exists chronically, something must be done. Since a variety of health problems can accompany the condition, it is important to address it effectively.

Fortunately, there are many effective treatments for insomnia. With recent research showing that self-management techniques for controlling insomnia can work better than using medications, this book has listed many that an individual can take to manage their insomnia problem.

When you crawl into bed and you can't to sleep, you become frustrated and toss and turn. And feel worse in the morning and know you have to do something to fix this dilemma.

Sleeping is one of our most basic and natural functions so we need to pay close attention and work at identifying the reasons why we are unable to sleep. Once we do that, taking some steps toward self-healing is well within your power.

Try the self-help techniques outlined in this book. If you have insomnia, all hope is not lost. You can overcome it with a little work, then afterwards you can enjoy sleeping through the night and waking feeling rested and refreshed.