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The National Women's Health Information Center

A project of the U.S. Department of Health and Human Services, Office on Women's Health



## Frequently Asked Questions about Insomnia

### What is insomnia?

It is not unusual to have sleep troubles from time to time. But, if you feel that you do not get enough sleep or satisfying sleep, you may have insomnia, a sleep disorder. People with insomnia have one or more of the following:

- difficulty falling asleep;
- waking up often during the night and having trouble going back to sleep;
- waking up too early in the morning;
- unrefreshing sleep.

Insomnia can cause problems during the day, such as sleepiness, fatigue, difficulty concentrating, and irritability. A person with insomnia may also have another sleep disorder such as *sleep apnea*, *narcolepsy*, and *restless legs syndrome*.

Insomnia is not defined by the number of hours you sleep every night. The amount of sleep a person needs varies. While most people need between 7 and 8 hours of sleep a night, some people do well with less, and some need more.

About 60 million Americans each year suffer from insomnia, which can lead to serious sleep deficits and problems. Insomnia tends to increase with age and affects about 40 percent of women and 30 percent of men.

### What are the different types of insomnia and what causes them?

A person can have *primary* or *secondary insomnia*. Primary insomnia means that a person is having sleep problems that are not directly associated with any other health condition or problem. Secondary insomnia means that a person is having sleep problems **because** of something else, such as a health condition (like depression, heartburn, cancer, asthma, arthritis), pain, medication they are taking, or a substance they are using (like alcohol). Insomnia can vary in how long it lasts and how often it occurs. Insomnia can be short-term (called *acute insomnia*) or last a long time (called *chronic insomnia*). It can also come and go (or be intermittent), with periods of time when a person has no sleep problems. Acute (short-term) insomnia can last from one night to a few weeks. It is often caused by emotional or physical discomfort, and can be related to a single specific event. Causes of acute insomnia can include:

- significant life stress (job loss or change, death of a loved one, moving);
- illness;

- environmental factors like noise, light, or extreme temperatures (hot or cold) that interfere with sleep;
- things that throw off a normal sleep schedule (like jet lag or switching from a day to night shift).

Chronic (long-term) insomnia is when a person has insomnia at least 3 nights a week for 1 month or longer. It can be caused by many things and often occurs along with other health problems. Common causes of chronic insomnia are depression, chronic stress, and pain or discomfort at night.

## **How is insomnia diagnosed?**

If you think you have insomnia, talk to your health care provider. An evaluation may include a physical exam, a medical history, and a sleep history. You may be asked to keep a sleep diary for a week or two, keeping track of your sleep patterns and how you feel during the day. Your health care provider may want to interview your bed partner about the quantity and quality of your sleep. In some cases, you may be referred to a sleep center for special tests.

## **How is insomnia treated?**

Acute, or short-term insomnia may not require treatment. But if your insomnia makes it hard to function during the day because you are sleepy and tired, your health care provider may prescribe sleeping pills for a limited time. The rapid onset, short-acting medications now available avoid many of the earlier problems with continuing effects (like feeling drowsy or groggy) the following day. Some medications may be less effective after several weeks of nightly use, however, and long-term safety and effectiveness has not yet been established. Side effects of sleeping pills (and over-the-counter sleep medicines) can be a problem, too. Mild insomnia often can be prevented or cured by practicing good sleep habits (see below).

Treatment for chronic (long-term) insomnia includes first treating any underlying conditions or health problems that are causing the insomnia. If insomnia continues, your health care provider may suggest behavioral therapy or medication. Most medicines that are used for sleep have side effects and must be used with caution. It is **not** recommended to use over-the-counter sleeping pills for insomnia. Behavioral approaches to treatment focus on changing behaviors that may worsen insomnia and learning new behaviors to promote sleep. Techniques such as relaxation exercises, sleep restriction therapy, and reconditioning may be useful.

## **What habits promote a good night's sleep?**

Good sleep habits can help you get a good night's sleep. For example:

- Try to go to sleep at the same time each night and get up at the same time each morning. Try not to take naps during the day because naps may make you less sleepy at night.
- Avoid caffeine, nicotine, and alcohol late in the day. Caffeine and nicotine are stimulants and can keep you from falling asleep. Alcohol can cause waking in the night and interferes with sleep quality.
- Get regular exercise. Try not to exercise close to bedtime because it may stimulate you and make it hard to fall asleep. Experts suggest not exercising for 3 hours before the time you go to sleep.
- Don't eat a heavy meal late in the day. A light snack before bedtime, however, may help you sleep.
- Make your sleeping place comfortable. Be sure that it is dark, quiet, and not too warm or too cold. If light is a problem, try a sleeping mask. If noise is a problem, try earplugs, a fan, or a "white noise" machine to cover up the sounds.
- Follow a routine to help relax and wind down before sleep, such as reading a book, listening to music, or taking a bath.
- Avoid using your bed for anything other than sleep or sex.
- If you can't fall asleep and don't feel drowsy, get up and read or do something that is not overly stimulating until you feel sleepy.
- If you have trouble lying awake worrying about things, try making a to-do list before you go to bed. This may help you to "let go" of those worries overnight.

See your health care provider if you think that you have insomnia or another sleep disorder.

**For more information...**

For more information on insomnia contact the National Women's Health Information Center at (800) 994-9662 or the following organizations:

**National Center on Sleep Disorders Research (NCSDR) (NHLBI)**

Phone Number(s): (301) 435-0199

Internet Address: <http://www.nhlbi.nih.gov/sleep>

**National Heart, Lung, and Blood Institute**

Phone Number(s): (301) 592-8573

Internet Address: <http://www.nhlbi.nih.gov>

**American Academy of Sleep Medicine**

Phone Number(s): (708) 492-0930

Internet Address: <http://www.aasmnet.org>

**National Sleep Foundation**

Phone Number(s): (202) 347-3471

Internet Address: <http://www.sleepfoundation.org>

The information in this FAQ was adapted from materials from the National Institutes of Health (NIH), including: National Heart, Lung, and Blood Institute, the National Institute of Neurological Disorders and Stroke, and the National Institute on Aging.

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*This FAQ has been reviewed by Carl E. Hunt, M.D., of the National Center on Sleep Disorders Research, National Heart, Lung, and Blood Institute, National Institutes of Health.  
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