



WEBINAR   
WEDNESDAYS

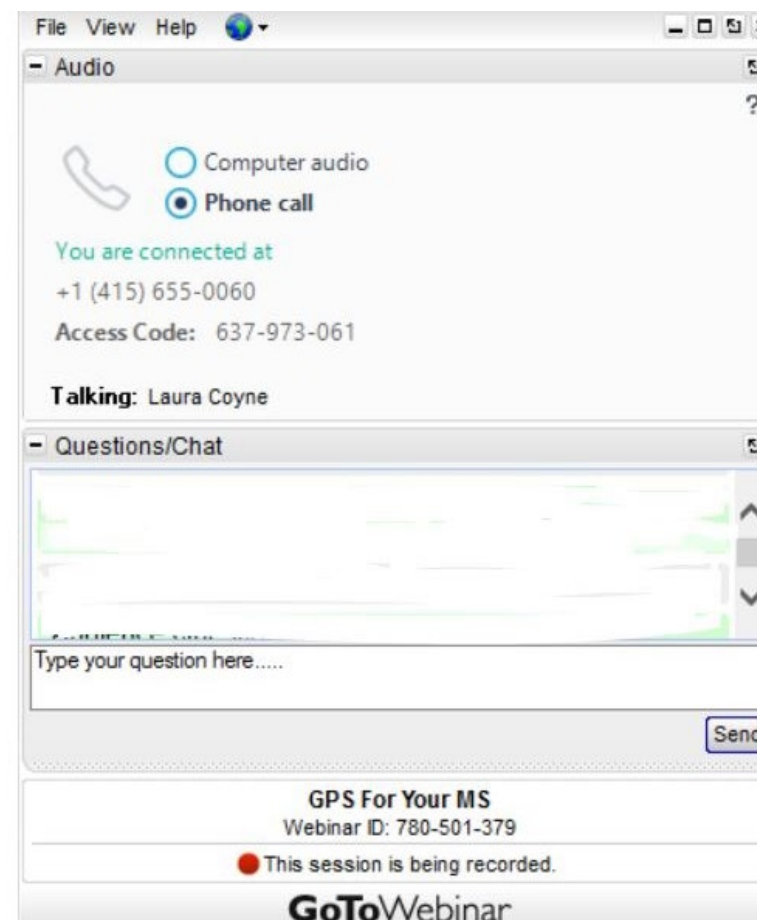
# How To Fall Asleep and Stay Asleep

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Type in your questions using the **Questions/Chat** box





# October Programs

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JUMPSTART - Oct 13  
*Get Started with Better Sleep*

YOUR QUESTIONS ANSWERED - Oct 18  
*Sleep & MS*

4-Part Coaching Series – Starting Oct 12  
*Fatigue*



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- Psychologist
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# Learning Objectives

1

Learn about common sleep problems in MS

2

Become familiar with the strategies and tools used to assess a person's sleep

3

Understand the strategies used to manage common sleep problems

# Sleep & MS

- Sleep difficulties are common in people with MS
  - About 4x more than the general population
  - 48-68%
  - Insomnia is the most common, especially in women
- This is an overlooked symptom, but one that can affect emotional and physical wellbeing

# Causes of Sleep Problems in MS

- Sleep is complicated!
- Some causes can include:
  - Lesions in brain structures involved in sleep
  - Changes in neurotransmitters involved in sleep
  - Vitamin D deficiency
  - Symptoms of MS (e.g., pain, urinary/bowel symptoms, fatigue, etc.)
  - Behaviors/habits
  - Depression, anxiety, and stress

# What Do We Mean by 'Sleep Disturbance'?

- Difficulty falling and staying asleep
- Sleeping too much
- Uncontrollable lapses into sleep
- Sleep-related breathing difficulties
- Abnormal movements and/or behavior during sleep
- Excessive daytime sleepiness





**In general, these problems lead to impairment in one or more areas of functioning**

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# How Do We Assess Sleep?

- If any these problems sound familiar to you, it is important to discuss with your healthcare team
- Sleep medicine specialists
- Thorough clinical interview
- Sleep study
  - PSG or HST
  - MSLT



# What Are Some of The Most Common Sleep Disorders?

Insomnia

Sleep Apnea

Restless Legs Syndrome

# Insomnia

- Acute Insomnia
  - Medical event
  - New stressor
- Chronic Insomnia
  - >3 nights/week
  - >3 months
  - Daytime dysfunction



# Insomnia: The Insomnia Severity Index

| Insomnia Problem                | None | Mild | Moderate | Severe | Very Severe |
|---------------------------------|------|------|----------|--------|-------------|
| 1. Difficulty Falling Asleep    | 0    | 1    | 2        | 3      | 4           |
| 2. Difficulty Staying Asleep    | 0    | 1    | 2        | 3      | 4           |
| 3. Problems Waking Up Too Early | 0    | 1    | 2        | 3      | 4           |

|  |                           |               |                          |                  |                          |
|--|---------------------------|---------------|--------------------------|------------------|--------------------------|
| 4. How satisfied/ dissatisfied are you with your CURRENT sleep pattern?  | Very Satisfied (0)        | Satisfied (1) | Moderately Satisfied (2) | Dissatisfied (3) | Very Dissatisfied (4)    |
| 5. How noticeable to others do you think your sleep problem is in terms of impairing the quality of your life? | Not at all Noticeable (0) | A Little (1)  | Somewhat (2)             | Much (4)         | Very Much Noticeable (4) |
| 6. How worried/distressed are you about your current sleep problems?   | Not at all Noticeable (0) | A Little (1)  | Somewhat (2)             | Much (4)         | Very Much Noticeable (4) |
| 7. To what extent to you consider your sleep problems to interfere with your daily functioning currently?      | Not at all Noticeable (0) | A Little (1)  | Somewhat (2)             | Much (4)         | Very Much Noticeable (4) |

# Sleep Diary

|   | <i>sample</i>   |   |
|---|---|---|
| <b>Today's date</b>   | 04/01/17  |   |
| <b>1. What time did you get into bed?</b>                                   | 22:15 p.m.  |   |
| <b>2. What time did you try to go to sleep?</b>                             | 11:30 p.m.  |   |
| <b>3. How long did it take you to fall asleep?</b>                          | 55min.  |   |
| <b>4. How many time did you wake up, not counting your final awakening?</b> | 3 times   |   |
| <b>5. In total, how long did these awakening last?</b>                      | 1 hour<br>10 min.   |   |
| <b>6. What time was your final awakening?</b>                               | 6:35 a.m.   |   |
| <b>7. What time did you get out of the bed for the day?</b>                 | 7:20 a.m.   |   |
| <b>8. How would you rate the quality of your sleep?</b>                     | <input type="checkbox"/> Very poor<br><input type="checkbox"/> Poor<br><input type="checkbox"/> Fair<br><input type="checkbox"/> Good<br><input type="checkbox"/> Very good | <input type="checkbox"/> Very poor<br><input type="checkbox"/> Poor<br><input type="checkbox"/> Fair<br><input type="checkbox"/> Good<br><input type="checkbox"/> Very good |

# A Note On Activity Trackers

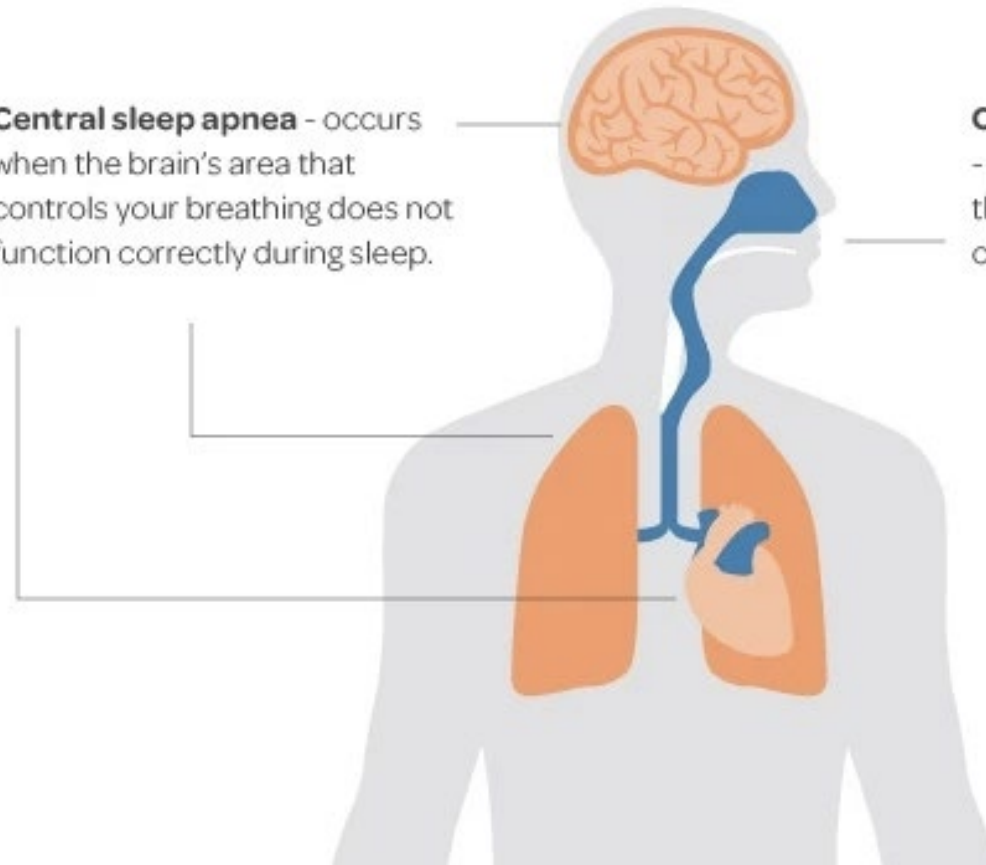
- 1 in 10 adults owns an activity tracker
- Research has found that wearable fitness trackers are less reliable in people who experience fragmented sleep and insomnia
- Relying on data from these tracking devices can sometimes increase anxiety about sleep —> which can worsen insomnia

# Sleep Apnea

- Brief episodes of paused breathing
- Can be caused by airway obstruction or lesions in the brain
- Bed partners can often observe these
- Waking with dry mouth
- Snoring
- Morning headaches

**Central sleep apnea** - occurs when the brain's area that controls your breathing does not function correctly during sleep.

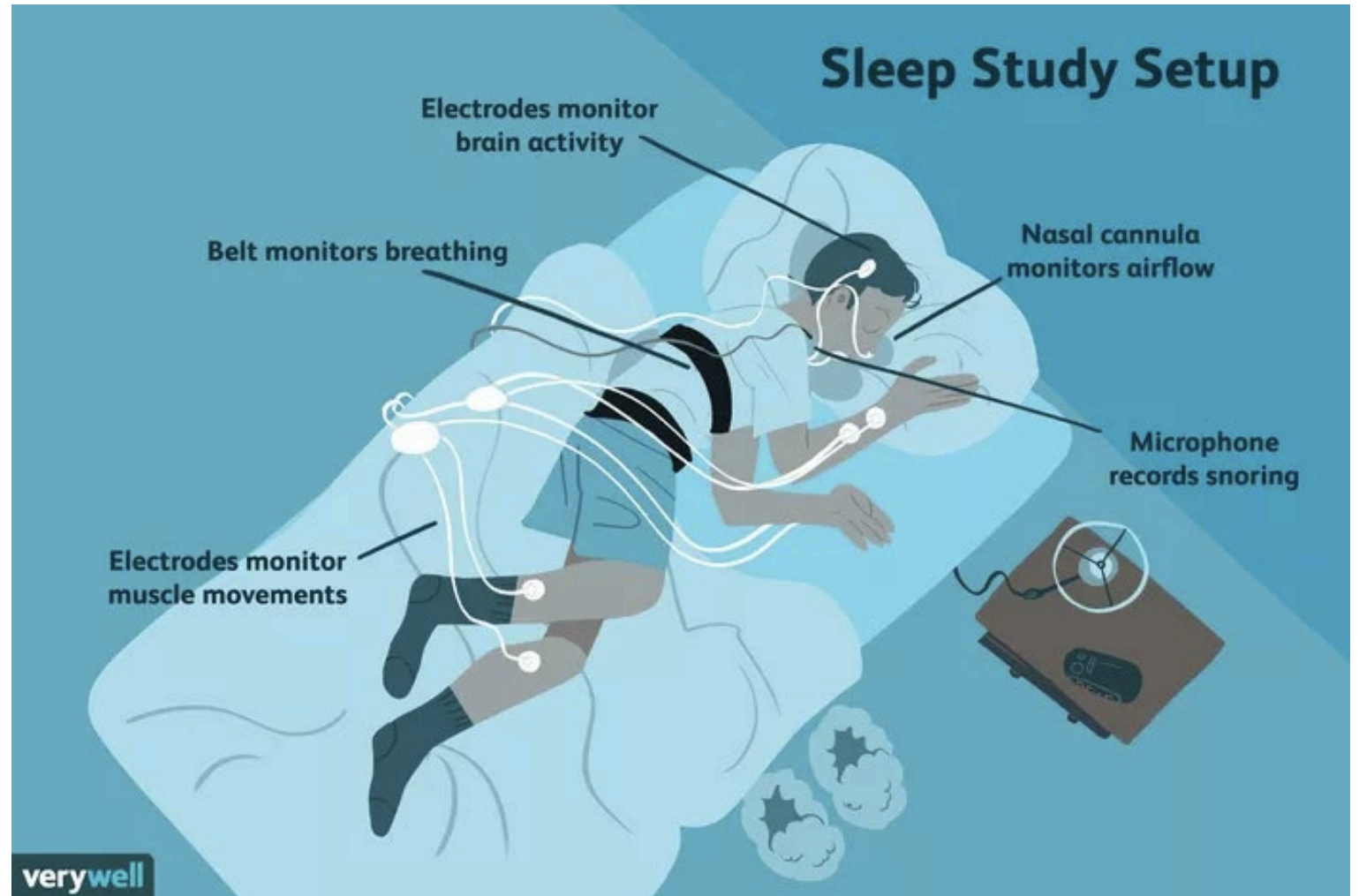
**Obstructive sleep apnea** - caused by obstructions in the upper airway that restrict oxygen to the body





# Sleep Apnea: Sleep Study

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# Restless Legs

- Different from spasms/tremors (uncontrollable movements)
- The movement is voluntary, but its in response to a very uncomfortable sensation in the legs that only goes away when moving



# Strategies For Managing Sleep Problems

- First - consult with your healthcare team
- Evaluation by sleep medicine specialist
  - You may need a sleep study to rule out different causes of poor sleep
  - Many people with MS can have more than one type of sleep disturbance (e.g., insomnia and sleep apnea)

A close-up photograph of a cat's face, focusing on its eyes and whiskers. The image is overlaid with a teal gradient that is darker at the bottom and lighter at the top. The text is positioned on the left side of the image, partially overlapping the teal area.

# How To Fall Asleep & Stay Asleep

# Treatment and Management

## **A multidisciplinary approach is best**

- MS symptom management
- Medications
- Medical equipment
- Behavioral sleep medicine
  - Cognitive Behavioral Therapy for Insomnia (CBT-i)

# Strategies For Better Sleep

- Wake up and get out of bed at the same time every day
- Go to bed only when you are sleepy
- Get out of bed when you are unable to sleep (exceptions apply)
- Use the bed only for sleeping (or rather, the 3 S's)
- Be strategic with naps
- Create a “buffer zone” or quiet time before bed
- Try to avoid worrying or planning in bed

# Strategies For Better Sleep

- Turn the clock around
- Limit caffeine
- Limit alcohol and avoid consuming within 3 hours of bedtime
- Exercise regularly but not close to bedtime
- Keep your bedroom quiet, dark, and cool
- Avoid heavy meals prior to bedtime
- Try to expose yourself to sunlight first thing in the AM if able and avoid electronics close to bedtime

# Resources



[National MS Society - Sleep](#)



[Fatigue and Sleep - CDMS Webinar](#)



[MS and Sleep - Sleep Foundation](#)



# References

Bamer AM, Johnson KL, Amtmann D, Kraft GH. Prevalence of sleep problems in individuals with multiple sclerosis. *Mult Scler*. 2008;14(8):1127–30

Mansukhani, Meghna P., and Bhanu Prakash Kolla. "Apps and fitness trackers that measure sleep: Are they useful." *Cleve Clin J Med* 84.6 (2017): 451-456.

Q & A





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WEBINAR   
WEDNESDAYS

# How To Be Your Sexual Self With MS

Wednesday, November 2 at 8pm ET

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