

I'll Sleep When I'm Dead: Sleep FAQs

Sleep was a mystery to us for centuries. It's only been the last few years that science is beginning to unravel what is truly going on when we sleep, and why it's not simply a waste of 8 hours in bed. Here are some frequently asked questions concerning why we don't get the sleep we need.

Is it true we need less sleep as we get older?

For the most part, this is a myth. All adults require between 7-9 hours of sleep. As we age, we have a shift in how much time we spend in the different stages of sleep, with older workers getting less deep sleep (meaning less human growth hormone production) as well as REM sleep, but spend more time in the lighter stages of sleep. We also see a shift in our chronotype, meaning that as we get older, we tend to become more "morning larks", getting up earlier in the day, often at the expense of not sleeping as long. It's not uncommon for older adults to make up for their shorter night sleep by having a nap during the day, getting them closer to that minimum requirement of 7 hours.

It seems like every night I have to get up and go to the bathroom, and then I have difficulty falling asleep. What can I do?

There are medical and non-medical reasons why you're waking up to pee in the middle of your sleep period. Urination at night (known as Nocturia) can range from 1 or 2 episodes to as many as 5-6 times per night. The more frequent, the more we need to be concerned.

Try to get most of your hydration during the daytime hours and cut back at night, with no liquids a couple of hours before you get to bedtime. Alcohol, coffee and tea are all diuretics and will increase the need to wake up and visit the bathroom.

Keep in mind that as we get older, our bladders lose their "holding capacity". We also have less of an anti-diuretic hormone that allows us to retain more fluid before we need to run to the bathroom! Older adults are at higher risk for certain medical disorders, or may be on medications that directly affect the bladder. Urinary tract infections, diabetes, and liver conditions could be culprits. Nocturia is also a warning sign for the development of something more sinister such as cancer of the bladder or prostate. Frequent urination isn't always due to a full bladder.

Finally, shift workers may experience a body clock disorder that makes the body think it's daytime when it's nighttime and vice versa, and upset the natural timing of when we're supposed to urinate.

If you can't attribute your Nocturia to consuming liquids too close to bedtime or some other cause, then please consult with your physician. Keep a daily drinking diary to help them determine what is going on.

I never dream. Is there something wrong with me?

Whether you know it or not, you are in fact drifting in and out of dreaming throughout your sleep, but if you don't wake up while it's happening, chances are that you won't recognize it. For example, most of our vivid dreaming occurs during REM sleep, but if you wake up during a different stage of sleep, you may not notice the dragon chasing you through the woods. If you wake up and remember your dream, it often reflects a more gentle form of waking up, as opposed to an alarm clock blasting you awake or your

kids jumping on top of you. A sudden awakening typically causes a spike in noradrenalin being released, which quickly washes away your ability to recall the dream.

There are many theories as to why we dream, but academics are leaning towards the memory consolidation process, meaning that it reflects the brain trying to figure out what information is important to keep, and what can be removed. Think of it like a file cabinet where you have to weed out the old information to make space for the new.

I have very vivid dreams. Most don't make any sense. Should I be worried?

One of the things that happens when we enter into our dream state is a heightening of emotions, creativity, and imaginings. This is due to a quieting of the frontal lobe of our brain, which is responsible for things like logic, problem solving, reasoning and self-control, and an increase in activity in our amygdala, which is responsible for our "fight or flight" hormones. As a result, our dreams are often incredulous, or make no sense at all. Don't worry. You're normal.

I'm a new parent. I am chronically sleep deprived. Please help!

A recent 2019 study examining new parents and sleep found that sleep deprivation lasted for the first 4-6 years after the birth of the first child. The first three months were the worst, with mothers receiving about 60 minutes less sleep, but improved to 40 minutes less sleep for the rest of the first year. The effect on fathers was less pronounced at only 13 minutes less sleep even during the first three months.

What's worse is that not only are you getting less sleep, but you have more interruptions throughout the sleep period, with one survey indicating new moms getting only 1-3 hours of undisturbed sleep at a time. This interrupts our sleep cycle and you may miss out on critical stages of sleep.

The act of breastfeeding is a known sleep enhancer, making it easier for mom to fall asleep while feeding as opposed to bottle-feeding which causes the baby to move about more and disrupt the quietness of the situation. More controversial but often promoted is the notion of breastfeeding and sleeping in bed with the infant to minimize awakenings to both mom and the baby. If it means less sleep disturbances, it might be in your best interest.

Napping is a tired parent's best friend. It can supplement the sleep you're not getting. To effectively nap during daytime hours, be sure you have blackout drapery with no TV or lights on around you. Use a white noise device to block out daytime sounds from outside. And most importantly, lie flat. We fall asleep quickly when we're lying down, but not so when simply reclining on the couch or in a chair. Try to always nap in the same location. Our bodies thrive on routine and as soon as you enter into your sleep space, it will help you to fall asleep quicker.

Still, every once in a while, you need a good solid night of sleep. Have your mother-in-law, siblings, or someone else who owes you a favour, take care of the kids for a night every couple of weeks so you can escape into deep, undisturbed sleep.

Finally, give yourself a break. The housekeeping police won't be coming by to see if you made the bed, dusted the shelves, and vacuumed the carpet. Time is your most important commodity. Make sure your older children keep up with the chore list. If cost isn't a huge factor, hire somebody to mow the lawn, clean the house, or pick up your groceries. And with all the options now available, ordering in food has become a lot more nutritious (and less clean up required)!

I've heard looking at my smart phone can be bad for my sleep. How come?

All of our smart technology is driven by blue-enriched LED light. Within the full spectrum of light, there is a particular blue stream that has a direct effect on our ability to sleep by suppressing the production of Melatonin. Melatonin is our natural sleep hormone. It's what helps us fall asleep and stay asleep.

During daytime hours, blue light exposure (including sunlight) is excellent. It can enhance our moods, improve focus and concentration, and actually help us sleep better at night. However, it's all about timing and any night time exposure (after the sun has gone down) is strongly discouraged. Since the impact of light is affected by distance, small handheld devices like smart phones, e-readers, iPads, tablets and laptops are more damaging due to their proximity to your eyes than a big screen TV across the room.

While many devices have dimming features to ease eye strain, that is not the same as a blue light filter and will do nothing to prevent the suppression of melatonin. Most of our newer devices have built in blue-light filters to reduce this damaging effect. Check if your device has one. Go into settings, display, and then look for either "night shift" or "blue light filter" to activate it. If you're a day worker, then use the automated "sunrise to sunset" feature. If you're a shift worker, you may want to select specific times for it to activate. Your screen will turn a pink or orange-ish hue and greatly improve the chances of you getting a restful sleep. If your device doesn't have a blue light filter, there are plenty of free blue light filter apps available online.

I've heard you can buy Melatonin. Do you recommend it?

Here's what we know. Synthetic melatonin is not the same as what your body produces, and does not take you through the sleep cycle like natural melatonin. Many side effects have been noted, including excessive grogginess the next day after you use it, upset stomach, and very vivid, horrific nightmares. It is also not recommended for people who have a history of depression, as it can enhance these feelings.

The most recent scientific literature is advising that you restrict the use of Melatonin to when you're travelling across to time zones, to help offset jetlag, but not to use it on a regular basis as a sleep aid. Not everybody produces, or requires, the same amount of melatonin, and the timing of taking it is just as important as the amount. Some need it earlier in the day than others. As for parents giving it to children, this a highly debated subject. There simply isn't enough long term research on the effects of children, but given what we know about the effects on adults, why take the risk?

A safer and gentler alternative is the natural supplement called L-Tryptophan. It is the precursor needed for the body to ultimately produce its own melatonin.

How do I know if I have a sleep disorder?

Very simply, if you wake up unrefreshed and struggle to stay alert throughout the day, you could have a sleep disorder. If it takes you longer than 30 minutes to fall asleep, and you wake up several times during the night and can't fall back asleep, you could have a sleep disorder. Most importantly, if someone tells you snore loudly, or has heard you gasp or choke during the night, you could have a sleep disorder. In this case, you may be suffering from Obstructive Sleep Apnea (OSA).

OSA is becoming more and more prevalent. It's the result of something blocking our airway while we sleep. We literally stop breathing. When it repeatedly lasts for more than 10 seconds, you officially have

OSA. This means we starve both the heart and the brain of oxygen, and this leads to all kinds of other significant health issues including cardiovascular disease and stroke. It also means we don't get through all of the sleep stages that we need to because every time we gasp for air, it wakes us up and out of the sleep cycle, thus preventing us from getting the recuperative sleep we need. You'll be constantly exhausted, unable to focus, and emotionally drained.

While obesity is a prime contributor to the onset of OSA (a size 17 neck for men is a primary risk factor), that doesn't mean other people can't have airway obstructions. People (including children) can have enlarged tonsils or adenoids that block the airway. A narrow palette with a wide tongue could collapse back into the throat during sleep. Sleeping on your back is also a known cause. Heavy smokers, drinkers and those using sedatives are at high risk, as they all cause the muscles of the throat and tongue to relax and collapse on themselves.

It has been reported that 1 in 4 Canadian adults have symptoms of OSA. If you think this may be you, book an appointment at a sleep clinic to get checked out. Depending on the severity, you may be outfitted with either a dental appliance (minor OSA) or a CPAP machine (severe OSA). A CPAP machine is one that provides continuous positive air pressure to ensure the airway stays open while you sleep and is the most effective method for combatting OSA. Check if your benefit plan covers the cost of these devices.

What sleep medication would you recommend?

In short? None. Both prescription and non-prescriptions medications (including melatonin) disrupt your natural sleep cycle so they don't replicate normal sleep patterns. Alcohol can be included here. More importantly, taking medication treats the symptoms, not the problem. Stress is a common cause of sleep disturbance, in addition to those previously mentioned. You need to address the heart of the matter for the best results!



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