

# Insomnia

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## Information about insomnia

Insomnia is a sleep disorder whereby you regularly find it difficult falling, or staying, asleep. Sleep problems are fairly common, and statistics show that [1/3 people in Britain](#) will have episodes of insomnia at some point in their life. For adults it is generally recommended to get 8 hours sleep every night, however this can vary from person to person.

## Forms of insomnia

You may find it odd that a feature of life with which everyone is familiar with, on occasion or from time to time, is listed as a problem. The truth is that lack of sleep may be a complicating factor in coping with times of stress. Additionally, some people have developed styles and patterns which deny them sleep. The positive side of this dilemma is that now a great deal more is known about sleep and some of the things which improve or induce it without the use of medication. This page addresses a few concepts and remedial activities.

### Normal

- Waking early
- Difficulty in getting to sleep for a period of time.
- Prolonged, disturbed and light sleep.
- Sleep which is interrupted by shock and fear on sudden waking (night terror).
- Sleep which is interrupted by nightmares.
- Small amounts of sleep with cat napping at other times.
- Occasional complete absence of sleep.

## Not so normal

- Any of the above which becomes chronic (i.e. lasts for an extended duration or occur in repeated bouts over a long time).
- Sleep which has a radically disordered rhythm.
- Disturbance caused by shift work.
- Seasonally affected sleep e.g. excessive sleep in winter.
- Sleep disturbance associated with feeling depressed (or having Chronic Fatigue or ME).
- Jet-lag.
- Apnoea (a sort of snoring but with a breathing lapse involved).
- Snoring problems.
- Teeth grinding.

## Strategies for addressing insomnia

Loughborough University has produced a short video of “Expert tips for a better night’s sleep” with Professor Kevin Morgan. You can watch it [here](#).

Strategies to beat insomnia tend to fall into these main categories:

- Getting help from others
- Changing your night-time routine
- Preparing the body for sleep
- Behaviour conducive to sleep

## Getting help from others

- Check with your doctor to assess whether you have a disordered pattern. This is particularly the case with abnormal sleep.
- Talk with a [counsellor](#) about issues which impinge on your sleep: depression, anxiety, stress, can all have insomnia as a symptom.
- Consider referral to a sleep clinic if matters are advanced.

## Changing your Night-time Routine

- Try to control the noise levels using ear plugs or 'white noise' as background distraction.
- Make sure the temperature of your room is comfortable - not too hot, not too cold.
- Don't go to bed hungry.
- Try to modify late night drinking and go to the toilet before bed in order to avoid being woken by a full bladder.
- Make your bed as comfortable as possible.
- Reduce mental activity two hours before sleep.
- Reduce light levels two hours before sleep.
- Have a range of distractions available for use in the event of insomnia, e.g. creating a relaxed area away from the bed with a hot water bottle and some light reading.
- Create a sleeping environment which has a freedom from work and disturbance e.g. No essay writing/screen use in bed!
- Do not do academic work 1 hour before sleep.

## Preparing the Body for Sleep

- Do some [slow, deep breathing with](#) a longer out breath.
- Use diet and herbs to provide you with the chemistry which encourages sleep, foods containing melatonin may be particularly helpful; oats, sweet corn, rice, ginger, tomatoes, bananas and barley all contain melatonin. Oats contain most, barley least. Broadly speaking, carbohydrates affect the production of tryptophan which is what affects the levels of serotonin in the brain. Thus, a small bowl of low sugar cereal or porridge in the evening may help.
- Temperature maintenance - ensure you are not too hot or too cold.
- Decrease caffeine intake before sleep - no coffee, tea, caffeinated soft drinks or chocolate after 5pm.
- Decrease alcohol intake before sleep (it dehydrates you).
- Avoid respiratory stimulants before sleep (e.g. cigarettes).
- Avoid exercise before bedtime (this increases stress response chemistry in many people).
- Try out aromatherapy - a dab of lavender oil on your pillow is often helpful.

## Behaviour Conducive to Sleep

- Limit your sleep time; don't oversleep, but similarly make sure you are getting enough.
- Avoid long daytime napping - a 10 minute 'power nap' is OK but no more!
- Don't allow too much sleeplessness to occur in bed. Get up and do light things until you feel drowsy again.
- Don't magnify or alarm yourself over your sleepless state, this may make it worse.
- Keep a clutter free sleep area just for sleep (and sex!).
- Consciously stop yourself worrying at night. Write concerns down and deal with them in the morning (keep a notepad by your bed for this).

## Useful contacts

[British Snoring and Sleep Apnoea Association.](#)

### [Hope2Sleep](#)

A Registered Charity run by Sleep Apnoea Sufferers, CPAP & Non-Invasive Ventilator Users and Sleep Professionals.

[Sleep Matters Helpline](#): 020 8995 8503

[office@medicaladvisoryservice.org.uk](mailto:office@medicaladvisoryservice.org.uk)

Trained, experienced nurses offering support with sleep issues.

### [Insomniacs.co.uk](#)

Advice from insomniacs to insomniacs

[Student Wellbeing and Inclusivity team](#): 01509 228338

[studentwellbeing@lboro.ac.uk](mailto:studentwellbeing@lboro.ac.uk)

To book an appointment with any of our services within Student Wellbeing and Inclusivity (including the Counselling Team, Mental Health Support Team and the Wellbeing Advisers), please complete [the referral form](#).

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