

# Sleep Times



## Did You Know

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## Message from the President

Recent sleep studies show that women have more difficulty sleeping than men. Their lifestyle responsibilities combined with three unique conditions during their lifetime – menstruation, pregnancy and menopause – can affect their sleep and quality of life. Our first two articles deal with surveys concerning women's sleep difficulties, and the third provides suggestions about personal sleep concerns that we should discuss with our doctor.

Sincerely,  
Mary O'Sullivan  
President

## National Sleep Foundation *Sleep in America* Poll: For American Women, Sleep Comes Last

This year's National Sleep Foundation poll focuses on women's unique sleep experiences. It reveals women in America are crowding out sleep with activities from early morning hours until late at night. For many, sleep is what's left only after everything else is done – from care of others, to household duties, outside activities and work.

As a result, only 39% of the 1003 randomly sampled adult women 18-65 could say they "get a good night's rest every night or almost every night." Additionally, the 2007 NSF *Sleep in America* poll found that chronic sleepiness may impact women's sex lives, relationships, mood and health. According to the poll:

- 67% of women say they frequently experience a sleep problem, and 43% say that daytime sleepiness interferes with their activities
- When pressed for time, 33% of women say they cut back on sex, 39% cut back on spending time with friends and family, and 37% aren't eating healthy
- 53% are somewhat likely to report being in a bad mood, sad or angry when they are sleepy during the day

Results of the NSF poll also show that sleep disorders are prevalent among women:

### *How to Get a Better Night's Sleep*

- Exercise regularly, but not just before bedtime. It's best to allow at least three hours before turning in.
- Go to bed at the same time every night, and avoid taking long naps during the day.
- Finish any work-related tasks early in the evening to allow yourself time to unwind before bedtime.
- Don't eat a large meal close to bedtime. You will be digesting food instead of getting good sleep.
- Make sure your

bedroom is conducive to a good night's sleep. Keep it dark, quiet and cool. Pets need to stay off the bed.

- Don't wake up in the middle of the night and toss and turn. Get out of bed and go to a relaxing area where you can do something quietly in low light until you again become sleepy. Then return to bed.

- 31% of women snore
- 29% use some type of sleep aid to help them sleep
- 19% experience symptoms of restless leg syndrome

The 2007 NSF poll also found that lifestyle may have an impact on women's sleep:

- 74% of stay-at-home moms report having symptoms of insomnia, but women who are married, work full-time, and have school-aged children are most likely to report symptoms of insomnia
- 44% of working, married women with no children or grown children, say they get a good night's sleep every night or almost every night
- Part-time working moms say they are sleeping well, and one-half (50%) report being in bed for more than 8 hours per night

"Women's unique role in society, illnesses and biology conspire to worsen their sleep," explains Meir Kryger, MD, chair of the 2007 the *Sleep in America* task force; adding, "Far too little attention has been paid to the sleep problems of women. It may be inappropriate to assume that sleep research done in men can be generalized to women."

Adapted from *NSF Alert*, March 6, 2007.

*Quanta Dynamics offers a new dynamic feature: "Why Sleep?" Podcasts. They provide short, lively, discussions using professional speakers on various lifestyle and sleep informational topics. To access our Podcasts, go to our website homepage for a direct link.*

## Women's Sleep Issues: Survey Says Doctors are on the Ball

A new survey issued by the American College of Chest Physicians Sleep Institute (ACCP-SI), found that pulmonary/critical care physicians are knowledgeable about women's sleep issues and are actively managing their patients' sleep problems by advising appropriate therapies. These findings are in contrast to the 2006 Institute of Medicine (IOM) report that shows health-care providers are lacking in sleep awareness and education, a gap that is leaving a significant number of women patients with sleep problems remaining undiagnosed and untreated.

According to Charles Atwood, MD, FCCP, chair of the ACCP-SI, "Sleep problems that are undiagnosed and untreated can affect a patient's health and cognitive performance. Yet, patients may learn to live with sleep problems and their consequences, never revealing their personal sleep habits to a physician. One thing we have learned is that pulmonary/critical care physicians are proactively inquiring about their patients' sleep habits. We are asking the right questions and are advising effective treatment. By doing so, we can begin to identify obstacles that may be prohibiting restful sleep for our patients."

### Patient's Sleep Habits

Atwood and members of the ACCP- SI surveyed 364 pulmonary/critical care physicians, who were identified as being interested in sleep and women's health issues, their knowledge of what happens during sleep (sleep architecture), sleep issues as they pertain to women, and how they managed sleep complaints from their female patients. The majority of responding physicians indicated they regularly ask their female patients about their sleep patterns and the sleep habits of family members. Here are their following responses:

- 81% regularly ask patients about their quality of sleep
- 72% regularly ask patients about their amount of sleep

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- 69% regularly ask patients about snoring
- 65% regularly ask about the sleep habits of a patient's bed partner
- 61% regularly ask about the sleep problems of family members

## Preferred Sleep Therapies

The majority of the responding physicians indicated behavioral therapy as the premier treatment for sleep problems in women, which is the accepted best practice in sleep medicine. Specifically, 67% of respondents were very or somewhat likely to use behavioral therapy for their female patients who have sleep disturbances, followed by hypnotics (33%), antidepressants (25%), and hormonal therapy (12%).

Adapted from *Sleep Review Magazine*, “*Sleep Report*”, March 21, 2007.

## What to Discuss With Your Doctor

Since sleep problems can be difficult to diagnose, the more you understand your own sleep patterns and complaints, the better able you will be to discuss different treatments with your doctor. Following are sample statements to help you focus your conversation:

- I have trouble maintaining sleep throughout the night
- I wake up early in the morning and can't go back to sleep
- I don't feel rested after I sleep
- I experience a lot of pain that prevents me from sleeping well
- I don't have enough time in my day to sleep 7-8 hours
- I feel that I am always chasing the clock
- My sleep environment isn't conducive to good sleep
- My bed partner snores
- I feel helpless and depressed and it has affected my life
- I have some unresolved issues nagging at me
- I am trying to sleep against my natural sleep cycle
- I travel often and usually for long distances
- I take a number of medications including: over-the-counter (OTC) drugs, prescription drugs, herbs, special drinks and vitamins

Try to uncover the real reasons why you may not be sleeping well, so you can enjoy the benefits of a good night's sleep without always having to rely on medications.

Adapted from: *Why Sleep? Your Guide to the Benefits of Sleep*,  
Mary I. O'Sullivan, MS, Quanta Dynamics, Inc., 2003.

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