

# Sleep Times



## Did You Know

*Sleep problems are the second most reported medical problem, the first being pain.*

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## Message from the President

This month's newsletter contains a variety of short research reports that recently have occurred in the field of sleep medicine. These examples allow us to continue our pledge as sleep educators, to review and highlight the very latest in sleep research and its related findings.

Sincerely,  
Mary O'Sullivan  
President

## Researchers Call for Increased Sleep Interventions in Patients with Type II Diabetes

Sleep and diabetes are intimately linked: sleep problems are common in people with diabetes and not getting enough sleep increases the risk of developing diabetes. To determine the effect of poor or short sleep on glycemic control (blood sugar control) in diabetics, a research team monitored the sleep and blood sugar of 161 diabetic patients. They found that patients with short sleep or poor quality sleep had impaired ability to regulate blood sugar, which suggests that chronic sleep loss may be a risk factor for diabetes. The research further supports the idea that adequate, quality sleep improves glucose control and reduces insulin resistance, thus improving patients' overall health.

Adapted from Archives of Internal Medicine's Special Issue on Sleep

## Healthy Sleep Without Prescription Sleeping Pills

**Accumulated sleep loss over time becomes a sleep debt that can have serious consequences for individuals, families, and employers.**

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“Our Resume Sparkles”

In amazing data from 31,000 Americans interviewed for the 2002 National Health Survey, researchers found that nearly one-fifth of adults reported difficulty sleeping in the last 12 months. Additionally, researchers found that about 5% of those who reported difficulty sleeping tried alternatives to prescription drugs to treat their sleeplessness. The majority of those who tried alternative therapies, such as meditation and herbal supplements, said they helped, with nearly half saying they helped “a great deal.” As for why people tried alternative sleep aids, the most common responses were: their doctor suggested it, they thought it would be interesting to try, and that conventional medicine was too expensive.

Hilary E. MacGregor, “Dozing Off Without a Prescription”  
Los Angeles Times, September 25, 2006.

## Light Deprivation Bad for Sleep-Wake Cycle

A new report by researchers at the University of Pennsylvania, Philadelphia, indicates that more light exposure is better for an individual’s sleep pattern, by helping to stabilize it, whereas light deprivation can throw a person’s sleep-wake rhythm off-kilter. The study was published in the October 1, 2006 issue of the journal *SLEEP*.

## Heart Failure Patients with Sleep Apnea May Not Feel Sleepy

A recent study suggests that about half of all patients with congestive heart failure also have obstructive sleep apnea (OSA). Doctors are not sure if one causes the other, but they do know that effectively treating both conditions is critical to patient care.

Contrary to what most would expect, this study found that heart failure patients with OSA report getting less sleep, but have less daytime sleepiness than those patients with heart failure who do not have OSA. In contrast, most OSA patients report daytime sleepiness as a primary symptom.

The study was conducted by a team of Canadian and American researchers looking at 155 heart failure patients who were evaluated with a polysomnogram (a sleep recording that displays brain activity, eye movement, and motor activity and is used as a diagnostic and clinical tool). Based on their results, the researchers conclude *that the absence of sleepiness is not a reliable way to rule out OSA in patients with heart failure.*

Adapted from Archives of Internal Medicine’s special issue on sleep

## The Buzz: What’s Happening in the World of Caffeine Research

Caffeine is a stimulant used by millions of people each day to promote and maintain alertness. Many people shun caffeine in the latter part of the day in order to avoid the sleep disruption that may accompany the caffeine buzz. In a recent

experiment a group of Montreal researchers uncovered an unexpected new feature of caffeine: that its disruptive effect on sleep is stronger on daytime recovery sleep after a night of sleep deprivation than it is on a normal night's sleep.

The researchers found that all of the participants in the study who had caffeine before their normal bedtime took longer time to go to sleep and spent more time in the lighter sleep stages than in deep sleep. But the people who took caffeine before daytime recovery sleep (such as shiftworkers) took an even longer time to go to sleep and had less total sleep time. The researchers concluded that: *caffeine has an intensified alerting effect when a person tries to sleep at a time when they are normally awake.*

Adapted from "National Sleep Foundation Alert," October 17, 2006

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