

Aging Well with Post-Polio Syndrome: Addressing Habits that Cause Sleep Problems

Researchers at the University of Washington's Aging Rehabilitation Research and Training Center, Seattle, Washington, mcmulk@u.washington.edu

Getting a better night's sleep may not always happen, but if your sleep problems are due to medical issues, there are ways you can manage them. Many medical problems can disrupt sleep in people with post-polio syndrome, such as breathing problems, so treating them is a first step in addressing sleep concerns. Sleep apnea, or episodes where people stop breathing during sleep, is a very important problem to discuss with your doctor if you have this symptom. Pain, which can also disrupt sleep, is a major topic that will be addressed in a future column.

Here are some physical factors that can disrupt sleep and tips on eliminating them.

Caffeine ... Caffeine often plays a role in sleep problems, because it is a stimulant that affects the central nervous system. It temporarily increases alertness and wards off drowsiness, which are also the reasons it can cause sleep problems. People who drink caffeine are less likely to sleep well than those who do not. If you have sleep difficulties, it is a good idea to avoid caffeine or limit it only to the morning. Caffeine is present not only in coffee and black tea, but also in many sodas. Check labels. Decaffeinated coffee and tea are good substitutes.

Alcohol ... Alcohol is a sedative. Although it may seem like it helps with sleep problems, it can actually cause them. For example, alcohol can help you to fall asleep, but it also disrupts the sleep cycle and the quality of sleep. The sleep you get after drinking alcohol is not restful, because it interferes with the ability to achieve and stay in the deep (so-called "Stage 3" and "Stage 4") sleep cycles. It is a good idea to avoid alcohol altogether if you have sleep problems; at a minimum, you should limit drinking it to earlier in the evening rather than right before going to bed.

Sleeping pills ... Even though they are often prescribed to help people fall asleep, sleeping pills can actually worsen sleep problems over time. They also can depress breathing. However, like alcohol, most sleeping medications disrupt the sleeping cycle by interfering with our ability to achieve deep and restful sleep. Almost all sleeping medications, if they are sedatives, are recommended to be prescribed for a very short time (two weeks at most) to help someone sleep during a stressful time. Many sleep medications are addictive, and your body builds a tolerance to them. This is especially true of the benzodiazepines such as Xanax®, Librium®, Valium® and Ativan®. If you are taking a strong sedative for sleep, you should talk to your doctor about tapering off. Getting off these drugs must be done gradually and with medical supervision. Stopping abruptly can be dangerous.

Nicotine ... Nicotine, whether smoked or chewed, is a stimulant like caffeine. It causes temporary alertness or jitteriness, and raises your metabolism. These physical changes can in turn keep you from falling asleep or disturb your sleep once you've fallen asleep.

Aging with a Physical Disability Survey Study

Aging Rehabilitation Research and Training Center, Department of Rehabilitation Medicine, University of Washington, Seattle, Washington

Announcing a new study on aging with a disability (muscular dystrophy, multiple sclerosis, post-polio syndrome and spinal cord injury)

PURPOSE It may be surprising to you, but rehabilitation professionals don't know much about the *natural course of aging* with physical disabilities such as muscular dystrophy, multiple sclerosis, post-polio syndrome and spinal cord injury. It is important to understand how aging impacts your life with a disability, and what to expect long-term as a person with a physical disability ages. The most fundamental requirement for increasing our knowledge and developing effective treatments is the availability of reliable, sensitive and meaningful ways of measuring things like pain, fatigue, mobility and communication, and their effects on day-to-day functioning.

RESEARCH ACTIVITIES If you decide to participate in this study, we will ask you to fill out two to four surveys over the course of four years, depending on your age. As long as you are over 18, you are eligible to participate. These surveys will ask you about your experience with pain, fatigue, sleep, participation in daily activities; your social support; and general mood and outlook. The survey will also ask for some basic demographic information, such as your age, gender and education. The survey will take about 60 minutes to complete. We will mail you the survey and include a postage-paid envelope that you can use to return it to us. Each time we have received your completed survey, you will receive a check for \$25 for your time and effort.

Participating in this research is completely voluntary. You may decide not to participate in this study, and you may withdraw from the study at any time. Your decision to withdraw will not affect your healthcare in any way. There are no penalties or loss of benefits if you choose not to take part in the study or if you decide to withdraw early.

PARTICIPATE If you would like to participate, please contact project staff at: University of Washington, Aging Rehabilitation Research and Training Center, Department of Rehabilitation Medicine, 206-221-5641 or 1-866-928-2114, agerrtc@u.washington.edu* ▲

**Please remember that we cannot guarantee the confidentiality of any information sent by email.*

For these reasons and more, nicotine can contribute to sleep problems (another reason to quit smoking).

To help you sleep better, you can try:

Exercise ... Getting regular exercise and being aerobically fit can contribute to good sleep. Fitness helps the body naturally create healthy sleep cycles. However, people with sleep problems may want to limit exercise to the morning, since vigorous exercise late in the day may make it difficult for your body to start winding down for sleep. If you have

sleeping problems and you aren't already exercising, explore an exercise program.

Other medications ... Unlike sedatives (discussed above), medications for depression *can* improve sleep and help you get back into a more normal sleep cycle. Talk to your doctor about this to see if a prescription would be right for you. Some anti-depressants that can help with sleep are trazodone, amitriptyline, Paxil® and Zoloft®. ▲

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