

## **Managing Insomnia without Medication**

If you are tired of feeling tired all the time, you're not alone. Insomnia—one of the most common patient complaints—affects up to one-third of all Americans. While patients with insomnia may respond well to various sedatives and medications, non-drug strategies can also be helpful.

According to osteopathic physicians, insomnia is considered a persistent condition because it is subject to frequent recurrences.

“Women, older adults and people with physical or emotional difficulties tend to suffer most from insomnia,” says the consulting doctor.

Some of the impairments that can be attributed to poor sleep include:

- Chronic fatigue
- Inattention
- Irritability
- Diminished productivity
- Emotional problems
- Absenteeism
- More frequent health complaints
- Increased alcohol usage
- Accidents

According to the doctor, the best place to start if you're dealing with a sleeping problem is to schedule an appointment with your physician.

“During the examination, the physician will try to identify the extent of a person's sleeping problem,” says this doctor. “For instance, sleep may be delayed because of excessive worrying, or interrupted because of nightmares or snoring.”

In addition, the physician will inquire about a patient's behaviors just prior to going to bed, such as reading in bed, eating a meal, consuming alcohol or caffeine, or exercising.

The consulting doctor adds that osteopathic physicians (DOs) are particularly adept at evaluating lifestyle and environmental factors that may be contributing to a sleeping problem.

## **Treating Insomnia**

While medications can be prescribed to improve sleep, there are many benefits to nonpharmacologic interventions.

“Behavioral techniques are simple, cost-effective methods that can be used alone or in conjunction with medications to improve a patient’s sleep,” our doctor says.

Below are some types of non-drug treatments for insomnia:

- **Sleep Hygiene** — Applying the basic tenets of sleep hygiene, such as developing a sleep ritual to make the transition from regular activity to sleep, can increase one’s total sleep time and improve sleep efficiency. For example, with a worry journal—a special diary used to record the trials and tribulations of the day along with possible solutions—people who tend to rehash their worries at night can write them down and then literally close the book on their troubles until morning.
- **Stimulus Control** — Any number of activities can be incompatible with getting a good night’s sleep, from watching TV to reading while in bed. The goal of stimulus control is to break bad habits and to behaviorally associate the bedroom with sleep. “If people can’t fall asleep, they should leave their bed to pursue a non-stimulating activity and only return to bed when fatigue returns,” the doctor says.
- **Sleep Restriction** — Sleep efficiency is the relationship between the time spent actually sleeping versus the time spent in bed. The goal of sleep restriction is to methodically reduce the amount of inefficient time in bed. “Sleep restriction can be difficult to apply, in part due to an erroneous belief that equates greater amount of time spent in bed with higher quality of sleep,” the doctor says.
- **Cognitive Treatment** — Cognitive treatments work through the identification of faulty thoughts that interfere with sleep. Through cognitive therapy, patients learn how to eliminate intrusive thoughts that impede sleep.

**For more information on non-drug treatments for insomnia**, visit a review of insomnia studies that appeared in the December 2010 issue of *JAOA – The Journal of the American Osteopathic Association*, a publication of the American Osteopathic Association.

Preventive medicine is just one aspect of care osteopathic physicians (DOs) provide. DOs are fully licensed to prescribe medicine and practice in all specialty areas, including surgery. DOs are trained to consider the health of the whole person and use their hands to help diagnose and treat their patients.