DOCTOR DISCUSSION GUIDE

Managing Insomnia

In order to resolve difficulty falling or getting back to sleep, you and your doctor will need to work together to understand your insomnia. Asking the right questions during your conversation will help you know what to expect and how to better navigate your condition. Familiarize yourself with these common terms before your appointment to help facilitate your discussion.

Vocabulary to Know
Your doctor might mention these common terms. Here’s what they mean.

<table>
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<th>Term</th>
<th>Description</th>
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<tr>
<td>Insomnia</td>
<td>The inability to obtain a sufficient amount of sleep to feel rested, either because of difficulty falling or staying asleep. It is the most common sleep disorder, with many potential causes.</td>
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<td>Sleep Drive</td>
<td>The desire to sleep that gradually increases the longer you’re awake. It is lessened during sleep, including napping, and affected by consuming caffeine.</td>
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<td>Circadian Rhythm</td>
<td>The natural pattern of body processes that are timed to a near 24-hour period. These processes include sleep-wake cycles, body temperature, blood pressure, and the release of hormones. This activity is controlled by the biological clock, which is located in human brains. It is highly influenced by natural dark-light cycles.</td>
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<td>Delayed Sleep Phase Syndrome</td>
<td>A circadian rhythm disorder in which the sleep period is delayed. This means that sleepiness and falling asleep occur later in the evening. As a result, alertness and sleep offset occur later in the morning than is usual.</td>
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<tr>
<td>Sleep Apnea</td>
<td>A chronic medical condition where the affected person repeatedly stops breathing during sleep. These episodes last 10 seconds or more and cause oxygen levels in the blood to drop and brief awakenings, sometimes leading to insomnia. It can cause and worsen other medical conditions, including hypertension, heart failure, and diabetes.</td>
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<td>Polysomnogram</td>
<td>Largely regarded as the gold standard for the diagnosis of sleep disorders, it is an overnight test typically done at a sleep center and monitored by a trained technician. It can be used to diagnose many sleep disorders—from sleep apnea to sleep behaviors called parasomnias—and may even be useful in ruling out other causes of insomnia.</td>
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<td>Sleeping Pills</td>
<td>Over-the-counter and prescription medications that are used to modify chemical signals in the brain that enhance relaxation and promote sleep and reduce wakefulness. Some sleeping pills temporarily affect memory while other drugs relieve anxiety by slowing brain activity. These drugs are meant for the temporary relief of difficulty sleeping and are not recommended to be used beyond two weeks.</td>
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Questions to Ask
These questions will help you start a conversation with your doctor about how to best manage your insomnia.

About Symptoms

- Beyond difficulty sleeping, what other symptoms that I have are commonly associated with insomnia?
- Do you think I have symptoms of another sleep disorder, like sleep apnea, that may be contributing to my condition?
- Are symptoms of an untreated mood disorder like anxiety or depression exacerbating my insomnia?

About Causes & Risk Factors

- Why do you think my insomnia started when it did?
- Do you have any specific insights on causes of insomnia to help me to reflect on what might be contributing in my case?
- Are there factors that we can identify that may be resolved to help end my chronic difficulty sleeping?

About Diagnosis

- Do you think it would be helpful for me to track my sleep patterns with a sleep diary and will you help me to identify potential interventions?
- How might sleeping pills, or the lack of a witness, mask symptoms that I should report to you?
- If my symptoms persist, at what point should I have a sleep study to identify causes of light, fragmented sleep and awakenings like sleep apnea?

About Treatment

- I know that the American College of Physicians recommends cognitive behavioral therapy for insomnia (CBTI) as the first-line treatment for chronic insomnia, even before the use of sleeping pills, so what resources are available for this treatment?
- Do I need treatment for any conditions that may be contributing to my chronic insomnia?
- What long-term effects of sleep deprivation should I be aware of and what can I do to reduce these risks?

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