Sleep and MS: Strategies for Improving Your Zzz's

December 13, 2016

Presented by:

Teva Pharmaceuticals | Acorda Therapeutics
Mallinckrodt Pharmaceuticals Autoimmune and Rare Diseases | US Bank
United Way of Eagle River Valley
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- **Chat Feature** – Type in your questions using the chat box on the lower left hand side of your screen.
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Baltimore, MD
WEBINAR & TELELEARNING SERIES

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CAN DO
Multiple Sclerosis

EMD Serono

Biogen

National Multiple Sclerosis Society
Types of Sleep Dysfunction

• Primary
  • Alterations in normal sleep patterns that cannot be attributed to other causes

• Secondary
  • Sleep disturbance that is caused by medical, behavioral, or environmental factors
  • More common in people with MS
MS Symptoms that Can Interfere with Sleep

- Pain
- Muscle Spasticity
- Depression and Anxiety
- Bowel and Bladder Dysfunction
- Temperature Sensitivity
Many Different Sleep Disorders

- Insomnia
- Hypersomnia
- Breathing-related sleep disorders
- Sleep-wake disorders
- Restless legs/body syndrome
- Narcolepsy
- Sleep behavior disorders
Consequences of Poor Sleep

- Depression, irritability, anxiety
- Pain
- Fatigue
- Problems with physical coordination, falls
- Problems with attention/thinking/concentration
- Poor work/driving
- Cardiovascular health problems
- Long-term poorer health outcomes
What you CAN DO to help your sleep!

• **Physical activity**
  • No current exercise routine?
  • Start low intensity, high frequency (e.g., walk, bike, swim few minutes/day)
• ChairFit with Nancy
  [https://www.youtube.com/channel/UCCAFFFLNiOjqR5FXtuH8ySxA](https://www.youtube.com/channel/UCCAFFFLNiOjqR5FXtuH8ySxA)
• National Center on Health, Physical Activity, and Disability
What you CAN DO to help your sleep!

• Physical activity
  • Try to complete physical activity early in the day
    • Exercise can be energizing/stimulating, which is great for managing daytime fatigue
  • PACING is key
    • Doing too much too fast leads to burn out and injury
What you CAN DO to help your sleep!

- Relaxation

- Meditation

- A word about “mindfulness” – not the same as relaxation, but can still be helpful
What you CAN DO to help your sleep!

• Behavioral Sleep Medicine

• Our thoughts and actions have direct consequence on our sleep

• Think about a time when you couldn’t sleep. While lying in bed, what were you thinking about? What did you do?
What you CAN DO to help your sleep!

• Cognitive Behavioral Therapy for Insomnia (CBT-I)
  • Sleep Efficiency Training
  • Stimulus Control
  • Sleep Hygiene
  • Relaxation
  • Cognitive Therapy

• CBT-I is usually completed in 6-8 weeks with a psychologist or appropriately trained health care professional.
What you CAN DO to help your sleep!

• Cognitive Behavioral Therapy for Insomnia (CBT-I)

  • CBT-I is usually completed in 6-8 weeks with a psychologist or appropriately trained health care professional

  • Starts with a SLEEP DIARY
<table>
<thead>
<tr>
<th></th>
<th>Day 1</th>
<th>Day 2</th>
<th>Day 3</th>
<th>Day 4</th>
<th>Day 5</th>
<th>Day 6</th>
<th>Day 7</th>
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</thead>
<tbody>
<tr>
<td>Start date:<strong>/</strong>/__</td>
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<td>I went to bed last night at:</td>
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<tr>
<td>I got out of bed this morning at:</td>
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<td>Last night I fell asleep:</td>
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<td>I woke up during the night:</td>
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<td>Last night I slept a total of:</td>
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</tbody>
</table>
What you CAN DO to help your sleep!

• Cognitive Behavioral Therapy for Insomnia (CBT-I)
  • Sleep Efficiency Training

• Maximizing the ratio of time asleep/time in bed

• Think about how many hours you spend in bed. How many of those hours are you asleep?

• >85% is recommended
What you CAN DO to help your sleep!

• Cognitive Behavioral Therapy for Insomnia (CBT-I)
  • Stimulus Control
What you CAN DO to help your sleep!

• Cognitive Behavioral Therapy for Insomnia (CBT-I)
  • Stimulus Control
What you CAN DO to help your sleep!

• Cognitive Behavioral Therapy for Insomnia (CBT-I)

• Stimulus Control

• Using bed only for sleep and intimacy
What you CAN DO to help your sleep!

• Cognitive Behavioral Therapy for Insomnia (CBT-I)

• **Sleep Hygiene**
  • Avoid/minimize naps
  • Avoid stimulants too close to bedtime
  • Avoid large high-carbohydrate foods before bedtime
  • Promote natural light
  • Create a bedtime routine
What you CAN DO to help your sleep!

• Cognitive Behavioral Therapy for Insomnia (CBT-I)

  • Relaxation (will practice later)

  • Cognitive therapy
    • A referral to a psychologist may be helpful
What you CAN DO to help your sleep!

• Relaxation Exercise
Medications & Substances that Can Impact Sleep

• Anticholinergics
• Stimulants
• Steroids
• Pain and Spasticity Medication
• Blood Pressure Medication
• Migraine Medication
• Depression and Anxiety Medication

• Alcohol
• Tobacco
• Caffeine
Environmental and Lifestyle Factors

- Room Temperature
- Sleeping Partners
- Screens
- Noise and Light
- Exercise
- Comfort
- Daytime Naps
Treating Sleep Dysfunction

• Address the Underlying Cause
• Adjust Medication Regimen
• Screen for Sleep Disorders
• Over-the-Counter Medication
• Prescription Sleep-Aids and Sedatives
“Red Flags”

Talk to your doctor if you experience any of the following:

• Excessive daytime drowsiness
• Loud Snoring
• Headaches or hoarseness in the morning
• Not feeling rested or refreshed after sleeping
• Trouble falling or staying asleep
Thank You!

Stephanie Buxhoeveden, MSCN, MSN, FNP-BC

Abbey J. Hughes, PhD

Questions/Comments
Can Do MS Resources

Can Do Library

Find these resources at www.MSCanDo.org.
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Thank you!