

Sleeping

C8

Alzheimer National Helpline

1800 341 341



Sleep is an essential part of wellbeing. Disrupted sleep is a common cause of stress for people living with dementia.

This factsheet provides information on sleep changes and suggests ways to try and manage sleep.

Why does dementia cause sleep disturbance?

No-one is sure why dementia causes sleep disturbance. It is thought that the changes in the brain caused by dementia can disrupt our natural body clock and disturb our sleep-wake patterns.

Sleep disturbance can cause insomnia. It can also mean that a person with dementia sleeps for a shorter time at night, wakes up more often during the night and takes more daytime naps.

Some less common types of dementia, such as dementia with Lewy bodies (DLB) or Parkinson's disease dementia (PDD), can bring a distinctive disruption of night sleep with nightmares. A person with DLB or PDD may physically act out their dreams while they are asleep.

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What are the effects of disturbed sleep?

In the short term, disturbed or disrupted sleep in adults can lead to increased stress, mood disorders, lower quality of life, and problems with memory and being able to think clearly. In the longer term, it can have more serious effects such as high blood pressure, raised cholesterol levels and cardiovascular disease.

The same is true for people with dementia. However, as the person with dementia is already experiencing memory and cognition problems, poor sleep is likely to make these problems worse. It is also likely to make the person more irritable and sleepy, and put them at a higher risk of falling.

How can we limit disturbed sleep?

Good sleep habits are important for all of us. Tips to help the person with dementia sleep well include:

- Avoid stimulants such as alcohol, caffeine (found in tea, coffee and some fizzy drinks) and nicotine well before bedtime.
- Limit drinks. Drinking too much fluid before bedtime might make them need to use the toilet during the night.



- Avoid a late dinner and evening snacks. Eating close to bedtime can cause problems with digestion (for example, heartburn may disturb sleep). However, feelings of hunger can also cause disrupted sleep, so a balance needs to be found.
- Limit screen-time before bed. Using laptops, tablets and mobile phones is known to cause problems with sleep.
- Limit naps. Too much daytime sleeping can make it harder to sleep during the night.
- Encourage exercise. Even small amounts of aerobic exercise, such as running or brisk walking, can improve sleep. For people with reduced mobility, access to fresh air and chair exercises may help.
- Spend some time outside. Our body clock reacts to sunlight during the day and darkness at night.
- Have a regular bedtime routine. This helps to tell the body that it's time to sleep.
- Make sure the person with dementia has a good sleeping environment. The bedroom should be quiet and not too hot or too cold, and the bed should be comfortable. Research suggests a dark room is preferable but some people may prefer some low-level lighting in the room.

What can you do if sleep problems continue?

If the changes to sleep patterns are small, then you might not need to take any action. Or a carer could make small adjustments to their own lifestyle to accommodate these changes. For example, you could replace a double bed with twin beds.

However, if the changes in sleep patterns are significant then more investigation into the cause will be needed. For example, you will need to take action if the person is getting up in the middle of the night and making lunch or leaving the house to go shopping.

In these situations, knowing the life story of the person can be helpful in understanding their sleep problem. For instance, if the person used to go to bed early, or worked night shifts, it is possible that their sleep patterns have reverted to those of earlier days. Similarly, if the person was always a poor sleeper or a light sleeper, this may explain why their sleep is disturbed.

There may be other reasons for the sleep disturbance and it may be necessary to consult a doctor or another health and social care professional. For example, the person with dementia may be unwell or experiencing pain, depression, anxiety or other illnesses. It is worth remembering that three in four people living with dementia also have another illness.

Would sleep medication help?

It is generally thought that sleep medications should only be prescribed when all other alternatives have failed to work. Sleeping tablets can increase the risk of falling and can increase confusion in a person with dementia. Sleep medication that is prescribed for a person with dementia should be stopped as soon as a settled sleep pattern has been established.

Are there any other treatments that might help?

In some cases, sleep disturbance is caused by breathing problems, where airways become partially blocked. When the brain realises that it is no longer getting the oxygen that it needs, it forces the person to wake up and to start breathing again.

The medical term for this is 'sleep apnoea' (app-knee-ah). It can happen at any age but is more common in older or overweight people. Doctors can recommend the use of a CPAP (continuous positive airway pressure) machine. This machine uses mild air pressure to try and keep airways from becoming obstructed.

Other strategies to try to improve sleep

Gardens and garden therapy

Gardens are known to reduce stress levels and promote relaxation. They can provide stimulation and promote an interest in nature and the outdoors. Being in a garden is restorative and helps people to maintain their circadian rhythms (which is the normal sleep/wake cycle).

Aromatherapy

Aromatherapy uses scents to improve mood and a sense of wellbeing. Some essential oils are associated with helping sleep, such as lavender and bergamot. Dilute the oil in water and use a diffuser to spread vapour, or mix the scented oil in a natural carrier oil for massage.

Light therapy

The general rule is to ensure brightness during the day and darkness at night. Light therapy is the regular exposure to daylight or an artificial light source such as a light box. This can reduce sleep disturbances or night-time wakefulness, as it is known to affect the sleep/wake cycle. Light therapy lamps are available online.

General advice for people giving support

Sleep is one of the cornerstones of human wellbeing. Getting less sleep or having disturbed sleep can significantly affect the everyday activities and quality of life for us all.

To be able to continue to provide good care, you also need to look after yourself. This includes getting enough rest at night and taking a break when possible. Things that can help include:

- If the person you care for does not sleep well at night, or has developed an erratic sleep pattern, consider taking shifts with another carer if possible.
- If you drink alcohol, then only do so in moderation. Alcohol may help you to fall asleep initially but it will reduce the quality and duration of sleep.
- Try to sleep while the person with dementia sleeps.
- If your husband, wife or partner disturbs your sleep, consider sleeping in separate beds or different bedrooms.
- Restraints of any type that keep the person in bed are not acceptable and will cause more harm than good.

Safety issues around sleep and night-time waking

- Leave some lights on. Many people wake during the night to use the toilet. Lights that are left on can help guide the person to the toilet.
- If appropriate, use alarms so that you know when the person gets up or leaves the room. Alarms that vibrate or that alert only the care partner are recommended, as these won't startle the person with dementia.
- Remove any trip hazards, such as loose rugs and cables.
- Lock exterior doors and close windows for safety. It is not acceptable to lock a person with dementia into a bedroom.



For further information and support

The **Alzheimer National Helpline** is a free and confidential service providing information about dementia, supports and services in your area, and living well day to day. It is run by the Alzheimer Society of Ireland.

Helpline: 1800 341 341
(free calls from landlines and mobiles)
Monday to Friday, 10am-5pm. Saturday, 10am-4pm

Livechat on the website: www.alzheimer.ie
Monday to Friday, 10am-11am and 3pm-5pm
Saturday, 10am-1pm

Email: helpline@alzheimer.ie
Website: www.alzheimer.ie

Contact a healthcare professional

If the person continues to behave in ways that are difficult to understand, talk to your GP. A GP can make referrals to Specialist Mental Health Services for Older People.

You can also speak to your public health nurse about access to home support, day care and respite care options. You can contact the public health nurse at your local health centre or you can contact the HSE.

Phone: 1850 24 1850 (calls are not free)
Email: hselive@hse.ie
Website: www.hse.ie

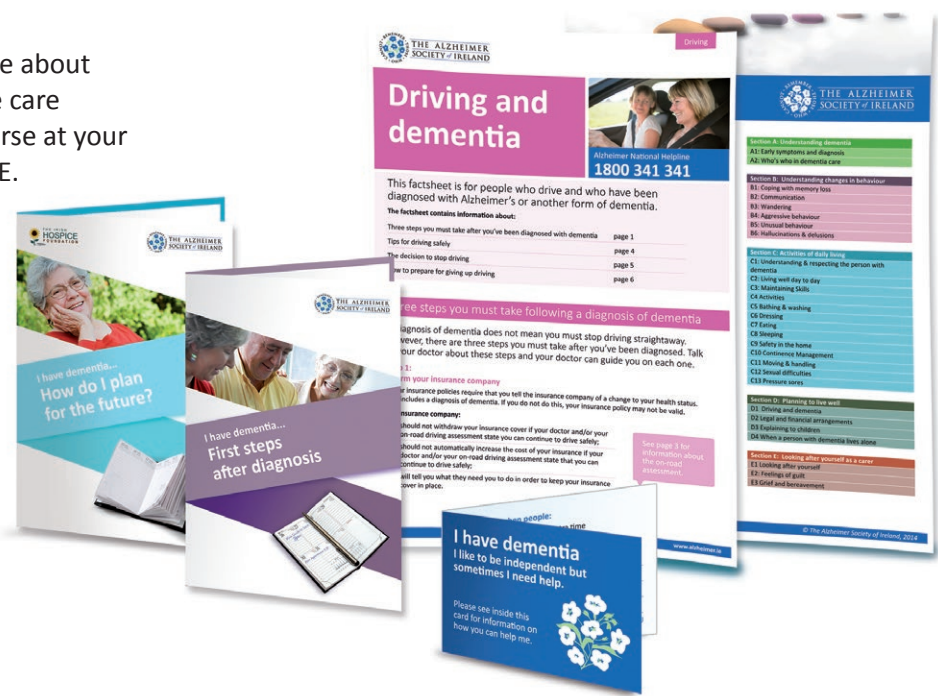
Other publications you may find useful include:

Practical tips for living well with dementia HelpCard: for people with dementia when out and about

Practical steps to support your independence

Loss and grief when a family member has dementia

For a free copy, call
1800 341 341



This information leaflet has been developed with the Dementia Services Information and Development Centre (DSiDC), www.dementia.ie and the Martha Whiteway Day Hospital, St James's Hospital, Dublin.

A special thank you to the family carers, members of the Dementia Carers Campaign Network who shared their experiences and for their very helpful comments and suggestions.

The Alzheimer Society of Ireland, ASI, has taken great care to ensure the accuracy of the information contained in this factsheet. ASI is not liable for any inaccuracies, errors, omissions or misleading information.

Factsheet: C8
Last Updated: September 2020
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