

TROPICAL LIFE

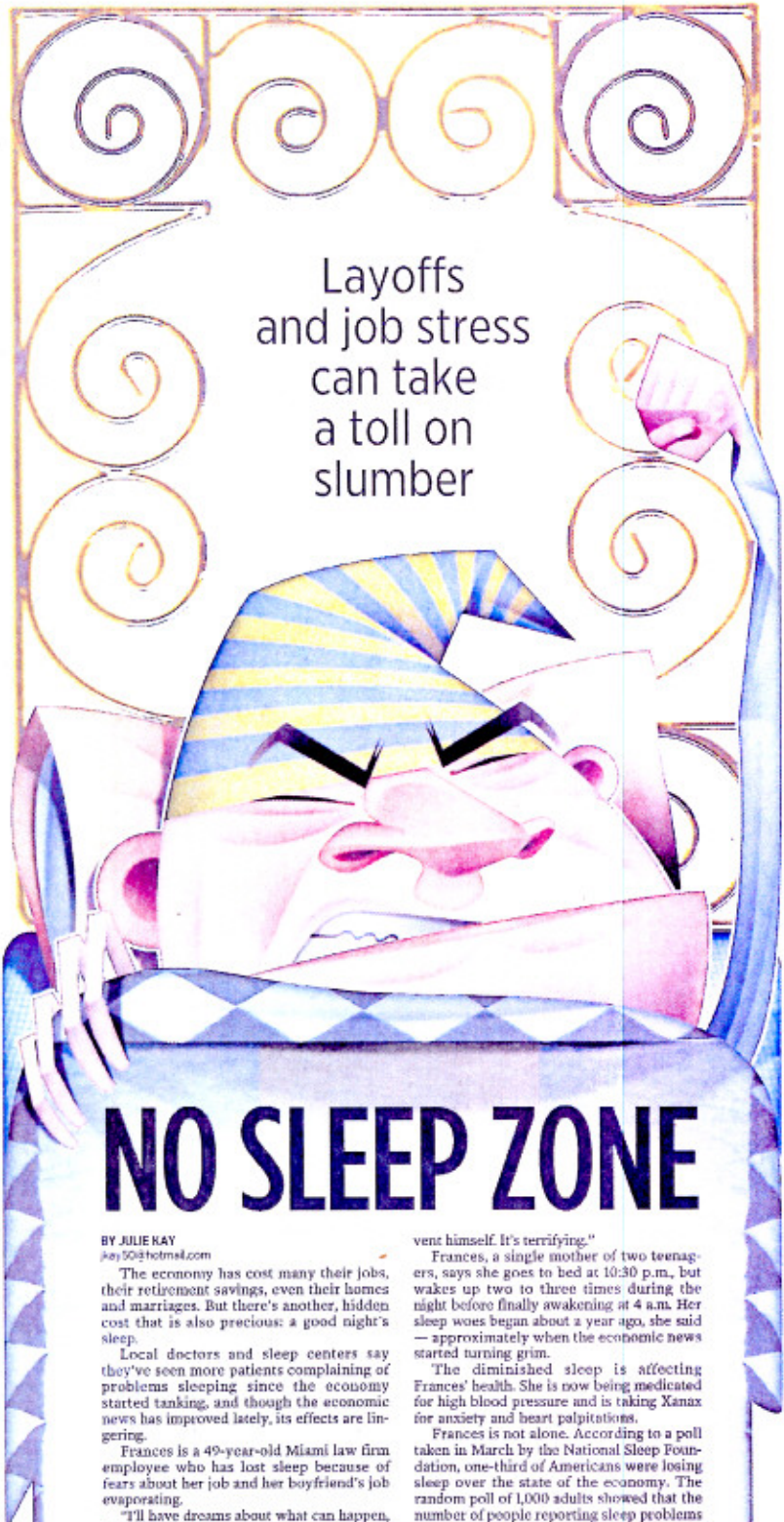
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The Miami Herald



TUESDAY, MAY 26, 2009 | EDITOR: JIM MURPHY jmurphy@MiamiHerald.com 305-376-3475 or 954-764-7026 ext. 3475

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Layoffs
and job stress
can take
a toll on
slumber

NO SLEEP ZONE

BY JULIE KAY
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The economy has cost many their jobs, their retirement savings, even their homes and marriages. But there's another, hidden cost that is also precious: a good night's sleep.

Local doctors and sleep centers say they've seen more patients complaining of problems sleeping since the economy started tanking, and though the economic news has improved lately, its effects are lingering.

Frances is a 49-year-old Miami law firm employee who has lost sleep because of fears about her job and her boyfriend's job evaporating.

"I'll have dreams about what can happen, of actual conversations of talking to my boyfriend and saying, 'Oh, my God, we've ended up in a shelter,'" said Frances, who asked that she not be identified by her real name. "I don't worry about the economic condition of his company, but he has a very unique position in a technical field. It would be difficult to quickly or in a reasonable amount of time find another position if he was laid off. He would literally have to rein-

vent himself. It's terrifying."

Frances, a single mother of two teenagers, says she goes to bed at 10:30 p.m., but wakes up two to three times during the night before finally awakening at 4 a.m. Her sleep woes began about a year ago, she said — approximately when the economic news started turning grim.

The diminished sleep is affecting Frances' health. She is now being medicated for high blood pressure and is taking Xanax for anxiety and heart palpitations.

Frances is not alone. According to a poll taken in March by the National Sleep Foundation, one-third of Americans were losing sleep over the state of the economy. The random poll of 1,000 adults showed that the number of people reporting sleep problems has increased 13 percent since 2001. In the past eight years, the number of Americans who sleep fewer than six hours a night jumped from 13 percent to 20 percent and those who reported sleeping eight hours or more dropped from 38 to 28 percent.

Losing shut-eye is no small problem. Experts say it can lead to chronic health

*TURN TO SLEEP, 8E

MC

Stress taking a toll on slumber

*SLEEP, FROM 1E

problems, affect people's ability to concentrate and do well in a job interview, and even lead to car accidents as people fall asleep while driving.

"It's easy to understand why so many people are concerned over the economy and jobs, but sacrificing sleep is the wrong solution," said David Cloud, CEO of the nonprofit National Sleep Foundation. "Sleep is essential for productivity, alertness and is a vital sign of one's overall health."

Dr. Juan Carlos Paredes, a Miami Beach psychiatrist, said that 80 percent of his patients have some degree of insomnia. Most of the problems can be attributed to the economy, he said.

"A lot of people are concerned about their finances and they unfortunately take those worries to bed," Paredes said. "Even if they come in for a different reason, I go over sleep issues with them and they are there."

Paredes, who considers sleep "the second most important bodily function after breathing," counsels his patients to live a healthy lifestyle — eat healthy, don't watch too much television, drink a lot of water, exercise, avoid cigarettes and "have fulfilling sex" — in order to get seven to eight hours of sleep a night, which is the recommended sleep time for most people, though individual needs can vary.

Still, Paredes acknowledges that he may have to prescribe sleeping pills for the seriously sleep-deprived — for example, people who just lost their jobs or homes.

At the Mercy Hospital Sleep Lab, business is so good that the four beds in the unit are usually filled. There, patients show up in their jammies and are given



AL DIAZ/MIAMI HERALD STAFF

WAITING FOR SLEEP: Carlos Estevez of Miami Lakes is hooked up to a tangle of wires for sleep observation at Mercy Hospital.

a private room, complete with television and bathroom. At 9 p.m., a technician comes in with a somewhat scary-looking array of colored wires and belts. The technician applies the devices, using a gooey gel, to the patient's head, jaw, nose, legs and waist.

The wires and belts are hooked up to monitors observed in a separate room by technicians throughout the night. If a patient stops breathing during the night due to sleep apnea, snores heavily, or awakens frequently due to restless leg syndrome, the monitor will show that. Those conditions are treatable with drugs or a special oxygen mask. If physical problems are ruled out, the patient is referred to a psychiatrist or psychotherapist.

Last year, the Cleveland Clinic Florida's Sleep Disorders Center in Weston

moved its sleep lab to the nearby Courtyard Marriott Hotel. There, patients with chronic sleep problems can be studied in a luxurious setting and don't have to be admitted to a hospital.

"We have definitely seen an increase in chronic insomnia in the last year," said associate director Dr. Jose Ramirez. "There is a very close relationship between stress and anxiety and insomnia. A lot of our patients have their own businesses and are undergoing a significant economic strain."

Those who lose their health insurance and can't afford doctors or sleep clinics have options, too. Companies selling sleep audiotapes, relaxing lavender aromatherapy and even calming bedside waterfalls report higher sales.

"We've seen a 40 percent increase in sales in the last few months," said Tim Frie-

sen, CEO of SleepAudios.com, which markets audiotapes in which a hypnotic voice lulls insomniacs into sleep.

There are other, more novel approaches.

Cynthia McKay, an Orlando native now living in Denver, is CEO of Le Gourmet Gift Basket, a company with 518 franchises. In the last year, she found herself up all night worrying about customers who weren't paying their bills. She was offered a prescription for a sleeping pill, but worried she could slide into addiction.

So McKay, 54, got a golden retriever. Now, when her mind starts racing at 2 a.m., she cuddles up to her friend and falls back asleep.

"I'm a Type A personality, running a company, always thinking corporate," McKay said. "Having my dog helps. It's pure, unconditional love."

Sleeping tips

Having problems falling or staying asleep? Here are some tips from Dr. Robson Capasso, assistant professor in the UHealth Sleep Program at the University of Miami School of Medicine:

BASIC SLEEP HYGIENE

- Don't consume caffeine after 4 p.m. or within six hours before bedtime. This includes chocolate products, which contains caffeine.
- Nicotine is a stimulant and should be avoided near bedtime and upon night awakenings.
- Don't drink alcohol four to six hours prior to bedtime. Though alcohol may seem to relax you, it interferes with your sleep patterns at night and may cause frequent awakenings and light sleep.
- Avoid strenuous physical activity within three to four hours of bedtime. Regular exercise in the late afternoon may help sleep.
- Avoid a heavy meal and excessive fluids too close to bedtime. However, a light carbohydrate snack before bedtime might help promote sleep.
- Use common sense to make your sleep environment most conducive to sleep. Arrange for a comfortable temperature and minimum level of sound, light and noise.
- Educate yourself about sleep — what is normal, how sleep changes with aging, the relationship between insomnia and other medical or psychiatric conditions. Many times, misconceptions about sleep, and worries about how one or two bad nights' sleep may affect the next day, may cause insomnia.

OTHER MEASURES

Below are other measures that can be effective, preferably with the help of a sleep medicine professional:

SLEEP RESTRICTION

Sometimes, if insomnia becomes extended, you may "lose confidence" in your ability to sleep, thus compounding the problem. To compensate, you'll spend more time in bed and sleeping in "several blocks" through the night or during the day.

Sleep restriction is an effective treatment in some cases. The goal is to improve sleep consolidation during the night. It is analogous to hunger; if you eat a little bit less, you will be hungrier at meal time. Therefore the goal is "quality first, then quantity."

So if you usually spend 7½ hours in bed, adjust your bedtime or wake up time so you will spend 6½ hours in bed, say, from midnight to 6:30 a.m. Things may seem worse the first few nights or week, but over time, your body's need for sleep will "break through" the insomnia and your ability to sleep may improve.

STIMULUS CONTROL

This is may be the most effective measure alone, and is based on principles of conditioning. With insomnia, your bed becomes associated with not being able to sleep and suffering, increasing anxiety related to bedtime. "Trying to sleep" is counterproductive; the harder you try, the worse it gets. The goal is to reestablish bed and bedroom as stimulus for sleepiness and sleep to occur.

Practical recommendations:

1. Do not go to sleep until you are sleepy.
2. If you are unable to fall asleep in 15 to 20 minutes, get out of bed and engage in a quiet, nonstimulating activity. Once you feel drowsy or start yawning, go back to bed. Repeat as needed. At first you may get up quite a bit, but over time as you break the bed association, the bed will no longer serve as a trigger for anxiety.
3. Maintain a regular rising time in the morning (no more than a one-hour difference is preferable).
4. Use your bedroom for sleep only (sex is only exception).
5. Try to avoid naps. If you feel sleepy, you can take a short nap (no longer than 30 minutes) about seven to nine hours after rise time.
6. Allow about one hour to unwind before bedtime (buffer zone).