

It is common for people with chronic pain to have sleep problems. This may involve difficulty getting to sleep, waking up frequently during the night, or early morning wakefulness. Falling asleep is understandably difficult when pain is out of control. What's more, lack of sleep, or poor sleep, makes pain worse because fatigue decreases your pain tolerance. Thus, pain and insomnia (difficulty with sleep) create a vicious cycle, each making the other worse.

While it is true that an adult's needs for sleep vary, 90% of people require approximately eight hours of sleep. If you do not feel tired, you are probably getting the right amount. If you do feel tired frequently, you may have a sleep problem. Emotional and medical problems can also cause fatigue even with adequate sleep. Thus, it is always good to have a thorough medical check-up.

Types of Sleep

There are two kinds of sleep: REM (Rapid Eye Movement) and NREM (Non-rapid Eye Movement). REM sleep is described as "active sleep" — snoring stops, breathing becomes irregular, and the eyes dart around under the closed eyelids. Twitching of the face and fingertips is not unusual. It is thought that dreaming occurs primarily during REM sleep. NREM sleep is described as "quiet sleep" — slow, regular breathing and absence of body movements. Snoring occurs during NREM sleep. The average person in a typical night of sleep will experience 4–5 cycles of sleep. REM and NREM sleep will occur in each cycle. Both types of sleep are important for healthy functioning in daily life.

In the past physicians often prescribed sleeping pills. This often made sleep more difficult after a

period because they interfered with REM sleep. In addition, people frequently experienced *rebound insomnia* — sleep problems that worsened after stopping the drug.

Today there is new research showing that a class of drugs commonly used in high dosages for treatment of depression is extremely helpful in very low dosages for people with chronic pain. They tend to improve both sleep problems and chronic pain. It is interesting to note that one of the main reasons that these antidepressants help with depression is because they help to restore normal sleep. With adequate sleep, the body is able to produce its own natural painkiller — *endorphins*.

Suggestions for Developing Healthy Sleeping Habits

- 1) Go to bed and get up at the same time every day (sleeping late will just make it harder the next night).
- 2) Develop a bedtime ritual (e.g., a bath, a glass of milk, a short relaxation exercise). Take some time to wind down from the stresses of the day.
- 3) Avoid napping — it generally increases problems of insomnia. For some people, napping renews energy and reduces tension. If you are having trouble sleeping at night, it is probably best to avoid naps.
- 4) Exercise. Vigorous exercise will increase physical fatigue, thereby helping one to sleep. Avoid exercise close to bedtime.

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- 5) No caffeine after dinner (perhaps avoid caffeine altogether).
 - 6) It is not a good idea to toss and turn for hours trying to fall asleep. If you are not asleep within 15 minutes, get up and do a quiet activity (e.g., knitting, jigsaw puzzle). Television could put you to sleep or wake you up, depending on what you watch. When you feel drowsy, return to bed. If you are still awake after 15 minutes, get up and go back to your quiet activity.
 - 7) Reserve your bedroom for sleeping (and lovemaking). It is important to associate your place of sleep with relaxation and calmness. Avoid paying bills, emotional discussions, arguments, etc., in your bedroom.

The International Pelvic Pain Society was formed to allow physicians, psychologists, nurses, physical therapists, and other professionals to coordinate, collect, and apply a growing body of information on chronic female pelvic pain. In doing this, we hope to be able to provide more relief and insure a more normal lifestyle for our patients. For membership information for healthcare professionals and patients, please contact us.

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