

Falling Asleep and Staying Asleep:

A Patient Guide to Treating Insomnia

Causes, Risks, Symptoms, Diagnosis & Treatment for Chronic Insomnia

WHAT'S INSIDE

Overview of Insomnia

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OVERVIEW

Insomnia is the inability to fall asleep or stay asleep. It is the most common sleep disorder, impacting about 1 in 5 adults in the U.S. Once insomnia gets started it can quickly take on a life of its own. Consequences range from worse quality of life and poorer brain function, to heart attack and premature death.

Insomnia may be acute, lasting a few days or weeks or it can be chronic, lasting for more than one month. While short periods of insomnia may be treated with medication, chronic insomnia may not always be helped by sleeping pills. For those with severe and chronic insomnia, an evaluation by a primary physician or sleep specialist often helps to get to the root of the problem.



The University of Maryland Sleep Disorders Center at the University of Maryland Medical Center Midtown Campus Sleep Disorders Center offers consultations, and overnight and day sleep studies. Our board-certified sleep experts made up of faculty physicians from the University of Maryland School of Medicine who specialize in pulmonology, psychology, psychiatry, neurology, cardiology, and otorhinolaryngology, work together to develop individualized treatment plans. Our sleep disorder specialists offer the most effective treatments available to help you fall asleep faster and stay asleep longer, so you feel better.

The UM Sleep Disorders Center offers pediatric sleep consultations and works closely with the University of Maryland Children's Hospital.

WHAT CAUSES INSOMNIA?

In most cases, Insomnia is not a disease, but usually reflects an underlying problem. Medications, illness, seasonal changes, sleeping environment, poor sleeping habits, and stress can all lead to trouble sleeping. Insomnia can also be a symptom of an underlying medical or mental health condition.

Most cases of insomnia have multiple causes, so comprehensive evaluation is essential.

WHO GETS INSOMNIA?

More than half a billion people worldwide suffer from chronic insomnia, but there are certain groups of people who are at an increased risk for developing insomnia:

- **Women** are roughly twice as likely to suffer from insomnia than men.
- **Older adults**
- **"Night Owls"** who have irregular sleep and wake schedules.
- People with **other sleep disorders** such as restless legs syndrome and sleep apnea.
- Those experiencing **pain, depression, anxiety, or other medical conditions.**

SYMPTOMS OF INSOMNIA:

- Tiredness
- Fatigue
- Irritability
- Difficulty paying attention
- Poor concentration
- Memory troubles
- Daytime sleepiness
- Low motivation
- Lack of energy
- Risk for accidents and errors
- Headaches
- Upset stomachs
- Difficulties at work, school, or with family
- Concerns or worries about sleep



DIAGNOSING INSOMNIA

While there is no official test for diagnosing insomnia, there are many different tools to help diagnose and measure insomnia symptoms:

A Sleep Log a diary that keeps track of details about your sleep habits. You will record details such as what time you wake up/go to sleep, how sleepy you feel at various times a day.

A Sleep Inventory is an extensive questionnaire that gathers information about your medication, medical and mental health history.

Blood Tests may be performed to rule out medical conditions such as thyroid problems, which can disrupt sleep.

Overnight Sleep Studies are performed to gather information about your nighttime sleep. During the exam, you will stay overnight and our experts will measure various factors such as; your brain waves, oxygen levels in your blood, heart rate, breathing and body movements. The sleep study is noninvasive and all sleep study rooms have been designed with comfort in mind.

Sleep studies are generally easy to tolerate, comfortable for patients, and give the sleep physician the information he/she needs to accurately diagnose and treat the sleep disorder.



TREATING INSOMNIA:

Insomnia treatment begins with a comprehensive evaluation to understand your personal sleep history and problems and what is causing your trouble sleeping.

Cognitive-Behavioral Treatment (CBT) is the most effective method for treating chronic insomnia.

This structured six-session program retrains patients' bodies and minds to achieve deep, restful sleep. CBT produces a longer-lasting benefit than sleeping pills, with none of the risks or side effects.

Hypnotics or more commonly known as sleeping pills. For long-term treatment of insomnia, we prefer a behavioral approach, but there are some patients for whom long term sleeping pills are acceptable. There is no one-size-fits-all approach and the appropriate treatment plan must be made on an individual case by case basis.

We also help patients discontinue sleep medications in a safe, structured way.

An expert from the UM Medical Center Sleep Disorders Center will discuss all or the available options and develop a personalized treatment plan for your situation.

WHY CHOSE THE UM SLEEP DISORDER CENTER AT UNIVERSITY OF MARYLAND MEDICAL CENTER MIDTOWN CAMPUS?

Nationally Accredited by the American Academy of Sleep Medicine (AASM) which ensures that sleep disorder patients receive the highest quality of care. The accreditation is the gold standard by which sleep medicine facilities are evaluated.

Patients Sleep Better: Our Centers CPAP compliance rate is 65% higher than the national average of 50% or less.

Sleep Laboratory has eight study rooms fully equipped, accredited, and designed to help assess the entire spectrum of sleep disorders.

Internationally Recognized Research and Clinical Trials: The Center is staffed by a team of experts who perform internationally recognized clinical, translational, and basic research which will lead to improved diagnosis and treatment. As a result, patients have access to this latest research and specialty care.



Sleep Log:

DAY	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1. Did you nap? a. For how long? b. At what time?	Yes No _____ mins _____	Yes No _____ mins _____	Yes No _____ mins _____	Yes No _____ mins _____	Yes No _____ mins _____	Yes No _____ mins _____	Yes No _____ mins _____
2. Did you have any caffeine* after 6 pm?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
3. Did you drink alcohol after 6 pm?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
4. Did you use nicotine after 6 pm?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
5. Did you exercise?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
6. Did you eat a heavy meal or snack after 6 pm?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
7. Did you take any sleeping medication? a. What medication? b. Amount c. At what time?	Yes No _____ _____ _____	Yes No _____ _____ _____	Yes No _____ _____ _____	Yes No _____ _____ _____	Yes No _____ _____ _____	Yes No _____ _____ _____	Yes No _____ _____ _____
8. Were you sleepy during the day?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
NIGHT	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1. What time did you turn off the lights to go to sleep?							
2. What time did you wake up?							
3. How many total hours did you sleep?							
4. How many times did you wake up in the night?							
5. Rate the quality of your sleep: 1=poor, 5=excellent							
6. Do you feel you got enough sleep?							

This sleep log was provided by the National Sleep Foundation

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