

# Wakeup Call for Insomnia

It's time to treat fragmented sleep like the brain disorder it is

I woke up several times last night thinking about everything I had to do this week. I tried relaxation exercises, then counting sheep. Finally, at 4 a.m., I gave up trying to go back to sleep. Now, it's 4:30 a.m. as I sit at my computer and write this with a cat on my lap and a steaming mug of coffee on my desk. It's dark outside and the world seems to be asleep—but I know I am not really alone. More than 70 million Americans suffer from insomnia, according to the National Sleep Foundation. That's nearly a quarter of the U.S. population—and a major public health problem!

Is sleep overrated? The authors of a recent Institute of Medicine report don't think so. They cite many adverse effects of not getting enough sleep, including high blood pressure, diabetes, obesity, stroke, and depression. Too-little sleep also contributes significantly to automobile accidents as well as workplace injuries and mistakes. And it adversely affects a person's ability to think and make decisions.

Interestingly, many of us wear our ability to “get by” on a few hours of sleep a night like a badge of honor. This is especially true for physicians, many of whom have been chronically sleep-deprived since their first days of medical school. Ironically, this same Institute of Medicine report recommends that education about sleep disorders be integrated into the medical school curriculum—so that physicians will be better able to recognize and treat the large number of patients in this country who have sleep disorders. My hope is that this will lead to better sleep habits for physicians and empathy for their patients who have difficulty sleeping.

And so it is extremely timely that this issue of *Neurology Now* focuses on the most common of sleep disorders: insomnia.

We all have a bad night every now and then—just as I had last night—for many reasons. When it happens repeatedly, this takes a toll on the entire body and

leads to brain changes that perpetuate a vicious cycle. As we learn in our Insomnia Special Report, people who have difficulty sleeping tend to have overactive brains at night. A brain imaging study showed that sound sleepers had quiet, peaceful brains while asleep; people with difficulty sleeping, by contrast, had too much activity in certain brain regions even when they were asleep.

All of which underscores the new view of insomnia as a brain disorder. Research is now showing that it's time to put to bed the notion that insomnia results from psychological problems. As our cover story shows, it is a neurological disorder warranting a nine-page Special Report.

Scientists now think that rather than being a symptom, insomnia may actually be the trigger for other brain disorders. Consider the relationship between insomnia and depression. It has been recognized for years that both conditions often occur together. We used to assume that the depression caused the insomnia. Now we are wondering if it's not the other way around, and that maybe depression can be staved off by treating insomnia quickly.

An important point to take away from all this is that disorders of sleep are very common. If you are one of the countless Americans who have insomnia or any other sleep disorder, there are effective treatments available to help. Our Special Report describes the latest insomnia treatments—from sleep medications to lifestyle modifications.

Of course, the first step to repairing your sleep is to talk with your doctor about your symptoms. Consistently restful sleep is important for your physical and mental health.

Sweet dreams.



We all need to pay attention to the **magnitude** of this problem.

Robin L. Brey, M.D.  
Editor-in-Chief