



BAI Beacon

The Newsletter from Family and Community Services

Coping with Disruptive Sleep

"Mother wakes up at night, goes to the kitchen and makes trail mix. She then hides it all over the house and forgets where she put it. I now stay up until 2:30 a.m. to help her, but then she only sleeps from 2:30 until 6:00 a.m. I'm exhausted!"

"My husband urinates in our bed and then gets up at 2, 3, and 4 a.m. looking for the toilet. I change the bed at least once every night. And, he refuses to wear protective underwear. I tried moving to the guest room but he wants me next to him. It's disgusting. I am so tired all the time."

"Dad is up all night trying to find a way out of the house. Last week we found him at 3 a.m. wandering in his pajamas about 4 blocks from our house. I've put locks on every door and now he is trying the windows. The doctor says to keep him up and active throughout the day, but that seems to make it worse."

Loss of usual sleep patterns is a common symptom in moderate to advanced dementia. Usually, by the time this happens, the person needs 24 hour supervision and assistance with personal care, along with family members and others who serve as supervisors 24/7. Few things are as disruptive for caregivers as losing sleep on a regular basis. Exhaustion comes quickly and is not relieved by a single night's sleep. This adds to the care burden and is often a reason families seek long term care placement. The problem with placement is that many settings prefer residents be asleep at night, because there are fewer night-time staff.

When night waking occurs it is best to figure out the cause and move to eliminate it. The following are some common causes of night waking and approaches to try:

- The person is over stimulated from daily activities. Try the following:
 - Provide two rest periods each day, ½ hour before lunch and up to 90 minutes after lunch. If the person goes to bed early, add another quiet period before supper. Make sure there is no TV on during rests.
 - Give both late afternoon and bedtime snacks. Ice cream can help at bedtime.
 - Calm, quiet activities at night AND calm television programming after supper may be helpful.
 - No single activity during the day should be longer than 90 minutes.
 - Incorporate regular walking or other exercise for 10-20 minutes each day.
 - Let each day follow a predictable routine.
- The person has pain at night:
 - Ask your doctor if it would be all right to try two acetaminophen extra strength tablets (1000mg) twice a day.
 - Put a pillow under the person's knees at night to prevent strain on the lower back. If the person is a side-sleeper, put the pillow between the legs.
 - If the mattress is old or firm, add a foam mattress topper to absorb pressure on aging bones and body parts.
 - The person may not realize he/she has pain so try these things anyways.

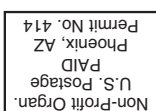
Tip on Brain Health: Sleep!

Getting a good night's sleep is important for your brain. Experts from the National Institutes of Health believe sleep gives neurons (brain cells) used while we are awake a chance to shut down and repair themselves. Likewise, without sleep, neurons may become so depleted in energy that they begin to malfunction.

Beacon Bits

BAI has 4 free unique support groups each month:

- Circle of Friends meets on the 2nd Thursday of each month, 12:30pm-2pm
- Frontotemporal group meets on the 2nd Tuesday of each month, 12:30pm-2pm
- Adult Children group meets the last Tuesday of each month, 5:15pm – 6:30pm
- Men Who Care group meets the 1st Wednesday of each month, 7:30am – 9am



- The person has mild heart disease that compromises circulation when lying down:
 - Speak to your doctor about this.
 - Have the person sleep on two pillows.
 - Have a fan on in the room to circulate air and provide white noise (face it away from the person).
- The person has been sleeping all day:
 - Encourage activities and exercise throughout the day.
 - Enroll in Adult Day Programming (do not ask the person if they “want to go to day care...”).
 - Ask the doctor about treating for depression.
- The person has urinary frequency:
 - Limit fluid intake after 6 p.m.
 - Avoid all caffeine use.
 - Ask the person’s care provider to check for urinary tract infections, prostate, prolapse, urinary retention (urine left in the bladder after urinating) or bladder pathology.

If these don’t help, you can check with your doctor about using medication. It is important to understand that you should not take your person’s sleeping medication regardless of how tired you feel. With a calm consistent approach to insomnia, it may be conquered. If not better managed, consider either hiring help at night so you can sleep or begin deliberate planning for placement. Working with your family member 24/7 will rob you of your patience and health.



Ask The Expert

Anna D. Burke, M.D.
Geriatric Psychiatrist / Dementia Specialist
Banner Alzheimer’s Institute

Dear Dr. Burke:

My wife has Alzheimer’s disease and isn’t sleeping through the night. This has been going on for four days. Please write prescriptions for both of us so we can get some rest!

Signed,
 Exhausted.

Dear Exhausted:

Whoa! I know you are tired but first we need to figure out why things have changed so dramatically. With a four-day change we need to consider all of the possibilities. First, I want to know if anything is different in your routine or household. Did you have visitors? Is it a holiday? Did you move or redecorate?

Second, before we consider a sleep agent we need to consider the following:

- What time is she going to bed? Can she get to sleep? Is she waking in the middle of the night? How often is she getting up at night?
- Is she agitated or disruptive? Or can you persuade to get her back to sleep?
- Is she incontinent or does she have to use the bathroom more than usual?
- Does she seem depressed?
- Does she have restless legs? Nightmares? Is she seeing things/people at night?
- Have you tried exercise, activities during the day, regular rest periods?
- Is she sensitive to medications?

Third, since I am your wife’s doctor, I am not able to prescribe for you. You need to discuss this with your primary care provider.

So, if we decide that medications are indicated for your wife there are several types of medication that may be used to supplement your efforts listed in the previous column:

1. Herbal supplements – This includes substances such as melatonin
2. Over-the-counter antihistamines – not recommended for use in Alzheimer’s disease as they can make confusion worse
3. Benzodiazepines – not recommended for elderly due to increased confusion and risk of falling
4. Antidepressants
5. Sedative/hypnotics
6. Antipsychotics – The last choice due to “Black Box” warnings

All of the medications given for sleep have unfortunate side-effects. First, the person may have a paradoxical effect where the opposite of the desired effect (sleep) is experienced. The person may “rebound” as the medication wears off, becoming quite agitated, or the person may have accumulation effects where they become more and more sedated over a few days. Falls and incontinence can occur, serving to further disable the person. Finding the right drug at the right dose takes skill, communication between you and the provider and, most of all, patience.

Dr. Burke

All groups meet in the BAI 3rd floor conference room. No registration is required.

Check out these programs created by BAI to promote meaningful activities:

- With Art in Mind, weekly art making class on Thursdays, 11:00am – 12:30pm, BAI 1st floor conference room. Registration encouraged. \$10 fee
- Arts Engagement Program is a series of interactive programs at the Phoenix Symphony, Phoenix Art Museum or Scottsdale Museum of Contemporary Art.
- RISE to Yoga is a chair yoga program that meets on the 2nd Thursday of each month, 12:30pm-2pm, during the Circle of Friends Support group. No registration required. \$10 fee for participation.
- Monthly Jam Session is a free interactive music program for people with dementia and caregivers. Meets the 1st Friday of each month at Herberger Institute ASU School of Music, 10:00am – 11:30am. Registration encouraged.
- GPS for Memory Lecture Series meets the 2nd Friday of each month from 11:00am – 12:00pm at the Desert Botanical Gardens, Webster Auditorium. Registration is required with free admission into the gardens

For more information or to register for any of the BAI classes, support groups or events, call 602-839-6850 or email Deidra.Colvin@bannerhealth.com.

Our Mission

To end Alzheimer’s disease without losing a generation, to set a new standard of care for patients and their families, and to forge a model of collaboration in biomedical research.

Have a Question?

To submit your question for future consideration email us at: baiinfo@bannerhealth.com