Sleep Disorders: Understanding Symptoms AND When to Call the Doctor

Going without sleep for extended periods of time has dramatic effects upon the body, as sleep is essential to prepare the body and mind for future activity. Understanding when to bring a sleep issue to a doctor's attention can make a great difference in one's overall health.

Obstructive Sleep Apnea (OSA)

What it is:

OSA is a disorder in which breathing is repeatedly interrupted during sleep with breathing pauses that last at least ten seconds. Obstructive sleep apnea occurs when the muscles in the back of the throat fail to keep the airway open, despite efforts to breathe. Another form of sleep apnea is central sleep apnea, in which the brain fails to properly control breathing during sleep. Obstructive sleep apnea is far more common than central sleep apnea.

Sleep apnea can cause fragmented sleep and low blood oxygen levels. This may lead to hypertension, heart disease and mood and memory problems. NOTE: More than 80 percent of dementia patients have sleep apnea.

When to call the doctor:

If a person experiences snoring on a regular basis and it can be heard from another room or the person stops breathing or makes loud or gasping noises during sleep, these are signs of sleep apnea and should be discussed with a doctor.

Other symptoms may include difficulty concentrating, depression, irritability, and learning and memory difficulties.

Restless Leg Syndrome (RLS)

What it is:

RLS is a neurological movement disorder characterized by an irresistible urge to move the limbs during periods of inactivity. RLS is often associated with an unpleasant, tingling, creeping, or pulling feeling in the legs, becoming worse in the evening and making it difficult to sleep through the night. Its prevalence increases with age and about 10% of people in North America and Europe are reported to experience RLS symptoms.

When to call the doctor:

Mild RLS may not bother someone enough to seek medical help. However, a sleep specialist should be seen if RLS is greatly disturbing sleep.



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Periodic Limb Movement Disorder (PLMD)

What it is:

About 80% of people with RLS also have PLMD and in one study, it was found that approximately 45% of all older persons have at least a mild form of PLMD. PLMD causes people to jerk and kick their legs every 20 to 40 seconds during sleep. As with RLS, PLMD often disrupts sleep—not only for the patient but the bed partner as well.

When to call the doctor:

Normally, a person is unaware of the movements; however, someone who sleeps in the same bed would be more likely to notice the movements. Symptoms to note include:

- One's body makes unusual, repetitive movements while sleeping
- These movements tend to occur in the lower legs
- One never feels well rested, even after a full night of sleep
- The person is currently taking antidepressants, anti-nausea or lithium medications (which may cause or worsen PLMS)

If any of these symptoms are present and sleep is greatly disturbed, it is time to see a sleep specialist.

Chronic Obstructive Pulmonary Disease (COPD)

What it is:

COPD affects over 12 million
Americans and is the fourth
leading cause of death in the
United States. COPD is a term
used for lung disorders such as
emphysema, chronic bronchitis,
and in some cases chronic
asthma. People with COPD may
have difficulty breathing, chronic
cough, fatigue, and chest
tightening. COPD can also result
in reduced blood oxygen levels,
causing fatigue and leading to
adverse health conditions.

When to call the doctor:

Morning cough is often the earliest sign of the disease, followed by noisy breathing, chest pain, and breathlessness. Other symptoms include:

- Difficulty breathing
- Chronic cough that produces sputum
- Wheezing, whistling, or hissing sound with breathing
- Chest pain or tightening
- Skin discolorations
- Frequent nighttime urination
- Insomnia
- Weight loss
- Daytime sleepiness

It is very important to contact a doctor if these symptoms are present and COPD is suspected.

Advanced Sleep Phase Disorder (ASP)

What it is:

People with ASP feel sleepy in the late afternoon. Bedtime tends to occur between 6 p.m. and 9 p.m. Since bedtime is early, they also wake up early. They tend to wake up between 2 a.m. and 5 a.m. While the timing of sleep is early, sleep itself is normal. ASP is more common in older adults and seniors.

When to call the doctor:

ASP is a sleep disorder that may or may not cause problems. Adapting one's lifestyle to the early schedule may be possible. If so, then treatment should not be needed. But this early sleep time is often out of line with the schedules of others, which may lead the person with ASP to try things that will make sleep problems worse. If this is the case, then one should seek a doctor's advice.

REM Sleep Behavior Disorder (RBD)

What it is:

RBD occurs when one physically acts out vivid dreams while sleeping. The dreams tend to be violent and episodes tend to get worse over time. Normally in REM sleep, most of the muscles of the body are paralyzed; however people with RBD do not experience sleep paralysis and will punch, kick, jump or do other short bursts of physical activity while sleeping. RBD occurs in less than one percent of people, but most often occurs in men. It can appear at any age, but it most often emerges after age 50.

RBD can be confused with sleepwalking and sleep terrors. People with RBD rarely walk, have their eyes open, leave the room, and do not eat or drink while sleeping. People with RBD are also able to vividly recall the dream they were acting out, whereas someone experiencing sleepwalking or sleep terrors is rarely able to vividly recall his or her dreams.

If a person feels he or she doesn't sleep well and is often tired during the day, this should be discussed with a doctor or healthcare provider. To find out more information on how to get a healthy, restful night's sleep and to learn about respite care and how we can help a family caregiver avoid the complications of sleep deprivation, contact **Responsive Home Health**.

When to call the doctor:

An RBD episode often disrupts the sleep of a bed partner and may actually result in an injury to the bed partner. This is how a person with RBD may become aware of the problem. People with RBD may also develop Parkinson's disease. A doctor's advice should be sought if RBD is suspected.



Sources: NIHSeniorHealth.gov, American Academy of Sleep Medicine