

We have compiled cancer information from some of our most trusted sources. This article on sleep problems is from **ChemoCare.com** and addresses the concerns patients may feel during or after chemotherapy.

Sleep Problems

What Is Insomnia (Difficulty Sleeping)?

Insomnia is the prolonged and usually abnormal inability to obtain adequate sleep. Sleep problems can either be difficulty falling asleep or difficulty staying asleep (also known as restlessness).

There are a variety of factors that may contribute to people having difficulty sleeping during chemotherapy treatments:

- Often times, chemotherapy drugs cause patients to feel tired and sleepy throughout the day. Therefore, patients on chemotherapy can end up napping or sleeping during the day and that leads to difficult sleeping at night or through the night.
- Sometimes sleep problems exist because of other medications prescribed to combat side effects of the chemotherapy. For example, steroids, like dexamethasone, may be prescribed to control nausea and vomiting from chemotherapy and can also make you feel energized (and cause difficulty sleeping). Hence, it is helpful to avoid taking steroids after five or six o'clock in the evening.
- Stress and tension of the cancer and the treatment can also cause sleep problems.

Things You Can Do To Manage Insomnia:

- Try to identify the cause of your sleep problems. What is insomnia caused by? Are you in pain? Are you worried about something? Are you drinking too much caffeine? Are you letting yourself sleep throughout the day? Are you feeling depressed or anxious?
- Share your thoughts with your health care provider about your sleep problems. One way to do this is by keeping a sleep diary. Chart the times you are asleep and awake. Note what you think may be contributing to your difficulty sleeping.
- Follow these guidelines to help overcome difficulty sleeping at night:
 - Do not eat or exercise within 2 hours of bedtime
 - Make the room dark
 - If you have an electronic clock, or one with an illuminated face, turn the face away from you.

- Use the bed only for sleeping (not for watching TV or reading)
- Keep a consistent sleep schedule. Make sure you go to bed each night and wake up each morning, at the same time.
- Minimize daytime naps. If you must take a nap, do not sleep for more than an hour at a time. Longer naps will make you feel more tired, and may contribute to sleep problems such as insomnia.
- If it's okay with your doctor, try some mild to moderate exercise during the day. For example, take a twenty- minute walk most days of the week. Exercise will help keep you up during the day, helps relieve stress, improve your mood, and oftentimes will help alleviate sleep problems.
- Ask your doctor or nurse if you are taking your medications at the right times of the day. As mentioned above, it is best not to take steroids in the evening.
- If you are drinking a lot of caffeine, try to slowly cut down and avoid drinking caffeine in the evening.
- If pain is causing difficulty sleeping, make sure you are taking prescribed medications as recommended. If this is not helping your pain, talk with your health care provider.
- If your sleep problems are because you are worried or anxious about your cancer, talk with your health care provider or social worker, and/or become involved with a support group. Try to listen to relaxing music or partake in activities that help you feel less tense (i.e. singing, praying, cooking, painting, reading, etc.).
- If you are feeling depressed, notify your health care provider.
- Some people have found over-the-counter remedies such as aspirin, ibuprophen, diphenhydramine (Benedryl®), Simply Sleep by Tylenol®, or acetaminophen with diphenhydramine (Tylenol PM®) to be helpful. As with any medication, you should check with your health care provider before taking any medications.

Other techniques to help you manage insomnia:

Behavioral - Cognitive Relaxation Techniques

There are several relaxation techniques that have been helpful in treating insomnia. Some of these can be done by one-self. Others may require a tape, CD or technician to facilitate:

- Progressive muscle relaxation - instructs the person to systematically tense and relax muscle groups. The goal of this is to relax all the muscle groups and relieve tension in order to alleviate insomnia.
- Passive muscle relaxation - instructs the person to identify tension in specific

muscle groups and use statements such as "let the muscle become limp, loose or heavy." This may be used in place of progressive muscle relaxation if pain is a factor.

- Meditation - focuses on breathing and verbal behavior. The person repeats a sound with exhalation.
- Autogenic training - uses verbal statements that suggest that various parts of the body feel calm, warm, or heavy.
- Counting - Although "counting sheep" is the classic folk remedy for insomnia, research suggests that it can be effective.
- Cognitive refocusing - involves replacing thoughts that cause sleep problems by distracting the mind. The person would focus on a scented candle or ticking clock, diverting thoughts that cause sleep problems.
- Ocular relaxation - involves the person moving his/her eyes in various directions, holding each one for 7 seconds. In between, the person focuses on another sensation for 40 seconds.
- Guided Imagery - suggests scenes or actions in which the person imagines himself/herself. Usually requires a tape, CD, or technician.
- Hypnosis - similar to guided imagery, however a physician or licensed hypnotherapist would be needed to induce deep relaxation

Drugs That May Be Prescribed by Your Health Care Provider:

Depending on the reasons you are having trouble sleeping, your health care provider may prescribe medication to help relieve the symptom or assist you in sleeping.

- If pain is causing your insomnia, your health care provider may adjust your pain medication or prescribe a different medication.
- If anxiety is causing your insomnia, your health care provider may prescribe an anti-anxiety medication if other methods of relieving your anxiety have failed.
- If depression is causing your insomnia, your health care provider may prescribe an antidepressant medication.
- If you are still having difficulty sleeping, your health care provider may prescribe a sedative medication for sleep problems:
 - Alprazolam (Xanax®)
 - Chlordiazepoxide (Librium®)
 - Clonazepam (Klonopin™)
 - Clorazepate (Tranxene®)
 - Diazepam (Valium®)
 - Estazolam (Prosom®)
 - Flurazepam (Dalmane®)

- Lorazepam (Ativan®)
- Oxazepam (Serax®)
- Prazepam (Centrax®)
- Quazepam (Doral®)
- Temazepam (Restoril®)
- Triazolam (Halcion®)
- Zolpidem tartrate (Ambien®)

Use of sedative medications for sleep problems must be closely monitored by your health care provider. Your body can become dependent (withdrawal symptoms upon discontinuing) to these medications. Your body may also become tolerant (medication becomes ineffective) to these medications. These medications for sleep problems can last a long time in your body. You may find that you feel tired during the day while taking these medications.

When to Contact Your Doctor or Health Care Provider:

- Let your health care provider know if you are having unrelieved pain, anxiety or depression that is causing difficulty sleeping.
- Sleep problems continue despite trying sleep management strategies.
- You have undesirable side effects of medications.

Note: We strongly encourage you to talk with your health care professional about your specific medical condition and treatments. The information contained in this website about sleep problems and other medical conditions is meant to be helpful and educational, but is not a substitute for medical advice.

Source: <http://www.chemocare.com/chemotherapy/side-effects/sleep-problems.aspx>