

## Our advice in parallel with the treatment

In the case of chronic insomnia, specialised treatment is necessary. This is the first step to improve the patient's sleep in an effective and lasting way, and will help avoid triggering other pathologies.

In parallel with the treatment, here are some tips that will help you improve your comfort on a daily basis :

- 1 Avoid stimulating beverages after 4pm (caffeine, theine, etc.)
- 2 Avoid alcohol and tobacco before bedtime or during the night
- 3 Eat a light, balanced evening meal to help digestion
- 4 Do not exercise 2-3 hours before bedtime
- 5 Create a comfortable environment with a temperature between 18 and 20°C
- 6 Sleep in a quiet, dark place

## The Sleep Blog

Get information, learn how to recognise the main symptoms of various pathologies and find practical advice on sleep.

[www.cenas.ch/blog](http://www.cenas.ch/blog)

- > new articles on sleep every month
- > practical advice
- > monthly newsletter

## You believe you might be suffering from insomnia ?

If you have any doubts about your sleep quality, it is important to discuss it with your doctor. You can also reach out to our Geneva sleep center to obtain information or schedule a consultation with a sleep specialist.

The clinical diagnosis of insomnia is based on the patient's complaints and description of the disorder. However, if there is any doubt about the type of insomnia, complementary examinations, such as actimetry, can help clarify the diagnosis. In some cases, a comprehensive sleep examination (polysomnography) may be recommended, especially if the patient shows signs of other associated sleep disorders such as sleep apnoea.



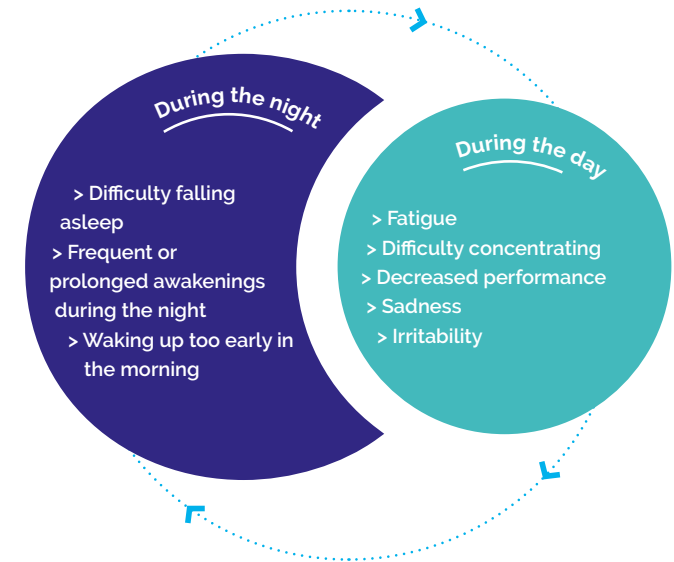
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OBJECTIVE SLEEP

## Insomnia

Learn how to identify symptoms :



**cenas**  
Médecine du sommeil

## Did you know ?

Insomnia is often trivialised and sometimes considered as a mere consequence of stress rather than a disease in its own right. If treated too late, the disorder can even become chronic.

10 %

It is estimated that 10-15% of the population currently suffers from significant insomnia.

2 x

In affected patients, chronic insomnia doubles the risk of developing depression.

10 years

The course of insomnia fluctuates between good and bad periods. For some patients, consultation in a specialised center can occur more than 10 years after the disorder first appeared.

157'000

This is the number of people in Switzerland who have a problematic use of sleeping pills and tranquillisers.

## I don't sleep much, am I an insomniac ?

Sleep duration is not a good indicator of insomnia because sleep needs vary from one individual to another. Some people only need 4 or 5 hours of sleep to be fit while others may need up to 9 hours!

A person is considered to have insomnia when they experience one or more of the following 3 times a week for several weeks :

More than 30 minutes to fall asleep

Prolonged night-time awakenings or early waking

## Understanding the mechanism of insomnia

Few people have never experienced a bad night's sleep, but not everyone suffers from insomnia in the medical sense.

Indeed, a patient with a predisposition is more likely to suffer from insomnia if they encounter triggers such as stress. In most cases, the disorder will last for a short period of time – from 1 to 3 months – and disappear when the triggering factors are resolved.

In other cases, insomnia may become chronic. This is what happens when patients start to worry about insomnia and its consequences. Anxiety about sleep then becomes a sustaining factor, which creates a vicious circle.

It is difficult for a patient to find appropriate solutions on their own, yet the consequences can be significant for their health.

- > Worsening of pain
- > Increased risk of developing depression
- > Decreased quality of life

## Existing treatments

### Non-drug treatments

These are the treatments of choice when insomnia is not associated with other disorders. Cognitive Behavioural Therapy for instance allows the patient to gradually regain the right reflexes to restore quality sleep. Other approaches, such as mindfulness or hypnosis, can also bring significant relief.

### Medication

Drug tolerance and dependence are the biggest risks when it comes to sleeping pills. That is why such treatments should only be used provisionally. Other treatments, such as antidepressants with sedative properties, can be considered if their use is carefully assessed.



No insomnia



Short-term insomnia



Chronic insomnia

### PREDISPOSING FACTORS

- > genetics
- > anxious personality
- > perfectionist profile
- > physiological factors

### TRIGGERING FACTORS

- > family or professional related stress
- > environmental factors (noise, light, heat)
- > somatic diseases
- > pain

### SUSTAINING FACTORS

- > poor sleep hygiene
- > irregular sleep patterns
- > spending too much time in bed
- > panic and anxiety about the situation
- > inappropriate medication