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Insomnia



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The Importance of Sleep

A good sleep makes you feel rejuvenated and spirited. It also helps restore your biological function and enhance your immunity against diseases. Even if you prefer to be active, busy and productive, make sure you leave enough time to allow your mind and body to rest and get a good night's sleep. Good sleep is greatly rewarding, and will do your brain and body a lot of good.

Chronic insomnia may adversely affect your personal life, physical and psychological well-being.

What is Insomnia?

Insomnia can be classified as:

1. Sleep-onset insomnia, i.e. failure to fall asleep after more than 2 hours in bed
2. Nocturnal awakening, i.e. difficulty in getting back to sleep after waking up in the middle of the night
3. Poor-quality sleep, i.e. failure to sleep well, feeling tired and unrefreshed upon waking up

According to the American Academy of Sleep Medicine 2005 and the fourth edition of the Diagnostic and Statistical Manual of Mental Disorders, insomnia is defined with the following criteria:

1. Poor sleep quality (a subjective perception)
2. Persistent difficulty in falling asleep and in maintaining sleep
3. Difficulty in sleeping for 3 nights or more in a week
4. Sleeping problems lasting over 6 months
5. Distress due to insomnia
6. Adverse impact on work, study, social life, etc.

How Common is Insomnia?

There are numerous studies conducted on insomnia in the US and the UK. Despite discrepant findings, all studies point to the same conclusion that one third of the population may be suffering from insomnia. The prevalence of insomnia in Hong Kong may look mild by comparison, yet recent studies showed that insomnia should not be taken lightly. According to a large-scale study conducted by The Chinese University of Hong Kong in 2002, 12 in 100 locals suffered from long-term insomnia. Another study conducted by the Department of Health in 2008 indicated that about one fifth of 2,000 respondents had poor sleep about two to three times a week in the month prior to the interview. A collaborative study on the epidemiology of insomnia was conducted by The University of Hong Kong and The City University of Hong Kong, which showed that on average 40% of the population had sleeping problems at least once a week over the past month.

Nature of Sleep

Muscles relax and brain activity slows down during sleep. Rates of respiration and heartbeat decrease, and body temperature drops. Reduced brain activity brings about changes in brain wave patterns, whose frequency, as demonstrated by electroencephalography, varies with the depth and stage of sleep. Brain wave pattern changes from alpha to theta, with emergence of sleep spindles and K-complexes as sleep deepens. With delta pattern, one is soundly asleep and all physiological activities, e.g. respiration, heartbeat, oxygen consumption, blood pressure, etc. will reach its lowest level. During this stage, one may become indifferent to the surroundings. In the terminology of somnology, this is referred to as Non-Rapid Eye Movement (NREM) sleep. In contrast, short periods of Rapid Eye Movement (REM) sleep, or the dreaming stage, will emerge in between NREM sleep during which one's brain becomes active with increased heartbeat and oxygen consumption.



Causes of Insomnia

Sleep quality is related to the following factors:

1. Poor daily habits

- Diet: Eating too much or starving, consuming caffeinated beverages (such as coffee, tea and soft drink) or alcohol, smoking
- Exercise: Strenuous exercise before sleep may lead to delays in falling asleep
- Medication: Use of steroids, pseudoephedrine, etc.

2. Environmental factors

General comfort level, which is influenced by noise at home, room lighting, temperature, suitability of mattress, etc.

3. Stresses

Daily life hassles: Short-term insomnia arises when a person is under pressure from changes in life, e.g. life events such as marriage, moving home, job change as well as transitions in interpersonal relationships. Insomnia should subside as soon as such changes and worries are resolved.

4. Physical discomfort or diseases

- Endocrine disorder, e.g. Thyrotoxicosis
- Cardiac problems such as Congestive Heart Failure, Arrhythmia
- Sleep disorders, e.g. Sleep Apnoea
- Menopause

Physical symptoms include:

- Itchiness
- Tinnitus
- Nocturia, e.g. Prostatism

- Musculoskeletal pain
 - Nocturnal cough, e.g. Asthma, Bronchial Hypersensitivity
 - Nasal obstruction or Post-Nasal Drip Syndrome in people with allergy
 - Nocturnal leg cramp
5. Emotional disorders
- Anxiety disorder (including Generalized Anxiety Disorder, Obsessive-Compulsive Disorder, Panic Disorder, Post-Traumatic Stress Disorder, etc.)
 - Depression (including Major Depression, Bipolar Disorder, etc.)
6. Unreasonable expectation or belief about sleep
- Short-term insomnia may become chronic if not handled properly, e.g. you may become obsessed about sleep, take frequent naps due to daytime tiredness, go to bed too early, feel tense and panicky about sleeplessness or not having a good night's sleep. Chronic worries may render you less able to fall asleep.

In serious cases one may become “hypnophobic,” which means being obsessed with and feeling panicky about whether one is indeed asleep throughout the night, or entertaining unrealistic thoughts about sleeping such as “I must sleep for 8 hours, or I will not be able to handle the job tomorrow” or “I will get really sick or even crazy if I cannot sleep well tonight”. Anxiety and tension may further lead to physical symptoms which interfere with your sleep, leading to long-term insomnia or other emotional problems that can adversely affect your daily life.



Healthy Sleeping Habits

- Maintain regular waking hours every day
- No naps during the day
- Relax before sleep. You may drink hot milk or take a hot bath before going to bed
- Do not force yourself into sleep while lying in bed. Take it easy and let sleep come naturally. Try not to check the time, or you may feel more tense and awake
- If you have been awake in bed for more than 30 minutes, get off the bed. Return to bed only when you feel sleepy
- Try not to do anything other than sleep in bed, e.g. reading, watching TV, etc. Such activities may weaken the association between sleep and your bed
- Do not fear insomnia. The more panicky you are and the more active your brain is, the harder it will be for you to fall asleep



When Should I Consult a Doctor?

If you are having difficulty sleeping, and you feel drained or that your daily activities are being adversely affected, you should consult your family physician. Your family physician will conduct a preliminary examination to see if further assessment is required. Your family physician may also advise you if your condition may be helped by pharmacological and/or psychological treatments.



Our Service

Together with the Clinical Health Psychology Centre, the Family Medicine and Primary Care Centre offers professional, appropriate and comprehensive sleep assessment and treatment to patients with insomnia. An individually tailored and integrated evaluation will be conducted including assessments of both physical and psychosocial conditions of the patient. Treatments ranging from pharmacological to non-pharmacological, and clinical psychology services may be provided if necessary.

Compiled by
Family Medicine and Primary Care Centre
Clinical Health Psychology Centre