

BREAST CANCER SURVIVOR PROGRAM INSOMNIA

- Healthy adults, including the elderly, need 8-9 hours of sleep each night
- Insomnia is described as the inability to get to sleep **or** to stay asleep.
- Other types of insomnia include: frequent awakening; waking up too early; and not feeling truly rested after sleep
- A person's sleep-wake cycle is determined by a variety of influences including emotional state, pain, environmental factors, not having a regular sleep schedule, needing to urinate at night, medications, caffeine, smoking, and hormones.
- Since nicotine is a stimulant, heavy smokers can be awakened by feelings of withdrawal.
- Persistent insomnia is a common experience of cancer patients
- Alcohol can help a person fall asleep but it interferes with rapid eye movement (REM) and deep sleep, which are the most restorative stages of sleep
- Research suggests that education and a good sleep plan are much more effective than medications at helping people improve their sleep pattern

MY ACTION PLAN

MANAGEMENT STRATEGIES

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| | Talk to my doctor or nurse about how I am feeling and the use of medications if needed. |
| | Establish a daily routine that includes a regular bedtime, awake time, meal time and exercise time. Stick to my schedule as much as possible, even during holidays and weekends. |
| | Make sure my sleep environment is quiet and has reduced light. A cooler room might also help. |
| | No eating, exercising or alcohol for several hours before sleep. |
| | No caffeinated beverages after lunch. |
| | Schedule a period of "downtime" to unwind before going to bed. |
| | Train myself to associate my bed with sleep by using the bedroom for sleep and sex only. No eating or watching TV in bed. |
| | If I am unable to fall asleep after 30 minutes of being in bed, I will get up a do something else, like reading, until I feel sleepy |
| | I will not nap during the day to "catch up" if I did not get enough nighttime sleep Investigate and use relaxation techniques such as yoga, meditation, deep |
| | breathing |
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| | Make exercise a normal part of my daily routine |
| | A minimum of 30 minutes three times per week is recommended. |
| | Check with my physician before I start my exercise program. |
| H | Personal goal: |
| | /ANAGEMENT |
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| \dashv | Take prescribed medication as recommended to manage my pain. |
| | Talk to my doctor or nurse if my pain is not adequately managed. |
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SMOKING CESSATION

Participate in a stop-smoking program

OTHER:

TO LEARN MORE:

Fitness and Exercise

Torrance Memorial

http://torrancememorial.org/Health Education/Fitness Exercise.aspx

Pain Control

American Cancer Society: Pain Control

http://www.cancer.org/Treatment/TreatmentsandSideEffects/PhysicalSideEffects/ Pain/PainDiary/index

Sleep Problems

American Academy of Sleep Medicine www.sleepeducation.com

ChemoCare.com: Sleep Problems: Insomnia

http://www.chemocare.com/managing/sleep_problems.asp

National Cancer Institute: Sleep Disorders

http://www.cancer.gov/cancertopics/pdq/supportivecare/sleepdisorders/Patient

National Center on Sleep Disorders Research

http://www.nhlbi.nih.gov/about/ncsdr/index.htm

National Sleep Foundation www.sleepfoundation.org

Smoking Cessation

Torrance Memorial: Breathe Freely – A Stop Smoking Program. (310) 517-4701 American Cancer Society: Guide to Quitting Smoking

http://www.cancer.org/Healthy/StayAwayfromTobacco/GuidetoQuittingSmoking/index

National Cancer Institute: Smoking Cessation and Continued Risk in Cancer Patients <u>http://www.cancer.gov/cancertopics/pdq/supportivecare/smokingcessation/Patien</u> <u>t</u>