

Sleep: Restoration and Renewal

I used to be called the “Queen of Sleepa.” Within two seconds of hitting the pillow I’d be off in lullaby land. No more! One o’clock, two o’clock, three o’clock in the morning, I’m wide awake—hit with a hot flash, a worry, a list of must-dos. I’m tired all night, tired all day—tired of being tired. Please help me.

I have no trouble falling asleep. My problem is waking up at three or four in the morning and being unable to fall back to sleep. It’s lonely, frustrating, and exhausting.

The littlest things now wake me up: my husband’s snoring, the birds outside my window, the wind in the trees, a noisy truck driving by. While I’m able to fall back to sleep, I never get a good solid stretch of time without interruption.

The sleep medicine works pretty well, but I’m afraid that I’m going to get hooked on it.

First Things First

Sleep is life’s essential; there is no compromise on the real thing. It is tonic, balm, medicine, therapy. Restorative. Sleep is a mystery—a fall into the unconscious, a magical transformation. What makes it happen? If only we could flip that switch at our command!

You need adequate sleep to perform basic everyday functions plus anything above and beyond. Need to recover from the anxiety and intensity of the breast cancer experience? Stressed to meet major deadlines at work? Dizzy from the merry-go-round of demands at home? Want to think clearly, speak well, be one of the living? Need to revive your

flattened spirit? Sleep is your first priority. Not snoozing, napping, daydreaming, resting, relaxing—we're talking about good, high-quality, solid sleep to revive your energy, focus, resources, motivation, and will to live your life fully.

MELATONIN, THE SLEEP HORMONE

What helps flip your sleep switch to the on position? When lights are out and it's time for bed, a little gland in your brain (the pineal gland) makes a special hormone called melatonin, which slows down the cells of your body so you can get your ZZZs.

There have been some intriguing studies showing that too much light or work at night may be associated with a higher risk of breast cancer. While it's hard to make any solid conclusions without gold-standard studies, there is some evidence that melatonin can influence how breast cells grow. Here is one possible explanation for how melatonin might play a role in breast health: Each night melatonin helps to slow down cell growth and activity. When enough melatonin is present to do its job, your body's cells are more likely to stay well behaved. Over time, however, if there's too much light and too little melatonin is produced, there may not be enough melatonin to slow down cell growth, keep the misbehaving cells under control, and possibly protect you against breast cancer. This possible explanation has yet to be fully proved.

What Happens During Sleep

Sleep cycles through various stages during the passage of a night. Normally, a person experiences about five sleep cycles during a night, with each cycle lasting about ninety minutes. Each cycle goes through these four stages:

1. **Light sleep** is a relatively short stretch (2 to 5 percent of the sleep cycle) when eye movement and muscle and brainwave activity begin a slowdown process. Light sleep can be easily interrupted.
2. **Middle sleep** lasts for 45 to 55 percent of the cycle. Eye movement ceases and brain waves continue their slowdown.

3. **Deep sleep** ranges from 13 to 23 percent of the total cycle. No eye movement or muscle activity occurs; metabolism has slowed and brainwave activity (called delta waves) is at a minimum.
4. **REM (rapid eye movement) sleep** lasts for 20 to 25 percent of the total sleep cycle. Active dreaming, brainwave activity, heart rate, and blood pressure are gradually ramped up and your arms and legs are temporarily paralyzed.

The reason you're paralyzed during REM sleep is probably so you don't act out your dreams. All that running and flying and whatever else you're dreaming about not only would exhaust you but also could prove quite dangerous. Waking from REM sleep is no big deal, but if you're dreaming about falling and then you wake up, you might find yourself flailing your way out of bed as the paralysis lifts.

As the night rolls through, deep sleep gets progressively less time in each cycle, while REM sleep takes up more time. Growing older can change the quality of your sleep: you tend to get less deep sleep and relatively more REM sleep.

The Main Purpose of Sleep

You depend on sleep for rest and restoration: while you're out for the count, a ton of work gets done. Sleep allows your mind to automatically:

- Consolidate your day's mental activities
- Organize what you've learned
- Add new data to your memory bank
- Edit the day's happenings into an orderly history
- Process the emotional experiences of your day
- Sort through your social encounters and settle them in context and perspective

Dreaming also helps achieve this consolidation.

Sleep allows your body to:

- Cleanse its internal self, keeping all your fluids flowing
- Reduce swelling in your legs (where gravity sends extra fluid

during the day when you're standing and sitting)—and possible swelling in the breast region and arms—by moving fluids back into circulation

- Flush out chemicals built up in your muscles
- Bolster your immune system
- Promote normal cell growth and development

Knowing how many critical jobs are accomplished during a good night's sleep, you can better understand why you feel and function poorly the day after a bad night's sleep—and why it's so important to learn how you can improve this necessary and restorative part of your life.

Challenges

Getting Enough Sleep

Nearly all of us say we don't get enough sleep. The crazy demands of modern life do steal precious sleep, and drain our energy reserves. On the other hand, some people who feel like they have sleepless nights may be getting more sleep than they think. Said one expert: "We have eight hours of recorded sleep for one patient in our sleep lab who insisted she didn't sleep a wink." Despite what may be an inaccurate sense of sleep quantity and quality for some, true insomnia is a troublesome problem for many, many women—and a good reason to seek evaluation. If you are sleep-deficient on a regular basis, physical and emotional exhaustion can hit hard:

- Things that ordinarily gave you pleasure no longer interest you.
- Routine problems can feel like emergencies; you may unravel and become a danger to yourself and those around you.
- Accidents and falls are more likely to happen.
- Hurtful words can slip out of your mouth before you can think.
- Judgment suffers and you overreact and underperform, much as if you'd had too much to drink.

There's no universal magic number when it comes to sleep. A few individuals claim they can function well on only four to five hours a

night, but these people are unusual (Naturally short sleepers may, in fact, have a genetic mutation that sets them up for fewer hours of sleep.) Most of us need from seven to nine hours a night. Some of us need even more. The myth of needing less sleep as you age is just that: a myth.

Interrupted and Irregular Sleep

The quality of your sleep is just as important as the amount of sleep that you get—and continuous sleep is essential in order to progress through the stages and get enough deep sleep. Because the brain has a hard time snapping to sudden wakefulness from deep sleep, interrupted deep sleep will likely cause confusion and irritation. Getting back to sleep soon after you've been awakened is critical to the overall restorative quality of that night's rest.

The regularity of your sleep routine is also very important. Do you have to catch sleep whenever you can—in between major family, community, and work demands? In my practice, I see a considerable number of women who work several jobs around the clock, meaning shifting work hours and erratic sleep schedules. Other women are worn down, mixed up, and strung out by the predictably unpredictable demands of managing the home base, stretching the finances, and taking care of everyone in the family—often including teenagers (and their friends).

Without a regular routine of work, play, eating, relaxation, and sleep, it is hard to train your body to get good-quality rest. Because your body knows the difference between night and day and between dark and light, when these outside cues are out of sync with your schedule your body gets confused and sleep suffers. Until you establish (or reestablish) a regular, consistent rhythm to your life, you'll feel disordered and vulnerable to stress and breakdown.

Sleep Anxiety

Both worry and anxiety keep you from falling asleep and keep you awake in the middle of the night. You may even lose sleep over losing sleep—and if it takes a long time to fall to sleep, you may worry you'll oversleep in the morning.

Because anxiety about breast cancer often hits at night, your bed can become haunted by your fears about your health.

Medicines, Ingredients, Foods, and Beverages

You probably already know many of the things you should limit or avoid if you want to get a good night's sleep. Here are a few that need to be at the top of your list:

- Caffeine
- Heavy meals close to bedtime
- Spicy or rich foods
- Alcohol (although it may help you fall asleep, it ultimately makes you more tired because it interferes with deep sleep)
- Ritalin, Adderall, and other such medications taken for attention issues
- Antiestrogen medications
- Steroids (discussed in Chapter 8 on fatigue), which in moderate to high doses can affect the deep, restful part of your sleep that's most restorative
- Nicotine, from a patch or from cigarettes

Hot Flashes

Debilitating hot flashes that seriously interfere with sleep are often a side effect of chemotherapy, antiestrogen therapy, and natural menopause. There are various ways to minimize these hot flashes, and new methods are constantly being explored (see Chapter 14).

Noise and Discomfort

Pain will wake you at night. So will noise. You may find certain noises almost soothing (like lulling constant traffic sounds), while other noises, such as slamming doors and intermittent barking, can drive you up the wall.

Snoring

Snoring happens when air moving through a partially blocked airway makes the back of your throat vibrate. Lips can also rattle. Are you the snorer, or is it your partner? If you are the snorer, you may not be troubled by your own snores. But if it's your partner who snores, it can wake you and keep you up.

Sleep Apnea

Apnea is when breathing stops during sleep because the tissues in the back of your mouth block airflow. When breathing stops, your brain may be slow to get breathing going again, and your heart can be stressed. Apnea may continue on and off throughout the night. Each episode usually lasts for no more than ten seconds—occasionally a minute or more. You wake up tired, unaware perhaps of being troubled by this condition.

Hypopnea, or shallow breathing, is another form of sleep apnea. The shallow breathing diminishes the supply of oxygen needed by the cells of the body, resulting in less efficient sleep and more tiredness.

Apnea often affects very overweight people and can be a serious condition. If neglected, sleep apnea can even be life threatening.

Solutions

The best gauge for whether you're getting enough sleep is how you fall asleep at night and how you feel when you wake up in the morning. A gentle falling off to sleep in a number of minutes is a good sign. If you wake up refreshed and energized, you've had a proper amount of sleep. If the morning finds you grumpy, groggy, and hard to rouse, you probably missed out on the sleep you needed.

If you fall asleep the moment your head hits the pillow, you may actually be sleep deprived. Aim to inch up the time you sleep, maybe an hour a night, till you've caught up on your sleep deficit, or treat yourself to an extra-long sleep on the weekend to make up for missed ZZZs.

Our sleep expert, Dr. Helena Schotland of Bryn Mawr Hospital, advises a general three-pronged approach to getting the sleep you need:

1. Attend to sleep hygiene—the conditions and habits that add up to your sleep environment.
2. Accept cognitive behavioral therapy—methods used to treat patients whose ideas, beliefs, or behaviors are causing them discomfort or unhappiness. Options include relaxation and distraction techniques and/or limited-time psychotherapy.

3. Consider sleep medication—preferably Rozerem, which has no tolerance issue, no problem with long-term use, and no dependence, and which is not a controlled substance (thus prescriptions are easier to obtain).

We'll start the "Solutions" section by first focusing on the essential elements of good sleep hygiene, which, when practiced together, will help you create the best setting, conditions, and practices to give you a solid, uninterrupted night's sleep.

Stick to a Regular Routine

Getting your body on a regular day-and-night schedule helps you form good sleep habits. Here are some important tips:

- Exercise on a regular basis during the day.
- Manage your hot flashes by avoiding the triggers and using the coolers described in Chapter 14.
- Try to get to bed at a regular time each night and get up at a regular time each morning.
- Eat your evening meal as early as possible before you go to sleep.
- Keep any later-night snacks light, and don't eat in bed.
- Avoid late-night phone calls unless there's an absolute emergency.
- Avoid late-night work that causes anxiety.
- Make sure the dog has been walked and is inside and settled before you go to sleep so that barking doesn't wake you up. Politely ask your neighbors to do the same. If your pets don't get it, put them in a distant room or the basement. They'll manage better than you think—and they'll probably get a better night's sleep, too.
- Don't stay in bed once you wake up.
- Make sure the alarm clock is set properly (not for yesterday's early-morning run to the airport).

These are some of the same steps you would use to train a baby. Setting up sleep limits gives your body a structure to work with and expect.

Avoid Caffeine and Other Stimulants

Caffeine from any of a variety of sources can compromise your sleep, particularly when taken after two o'clock in the afternoon (or even after noon if you're especially sensitive). Take extra care to limit or avoid using:

- Coffee and tea. Even decaffeinated versions of coffee and tea have more caffeine than you'd suspect.
- Sodas—Coke, Pepsi, Mountain Dew, Jolt, Surge, and even some orange sodas all have a lot of caffeine along with the bubbles (look at the ingredients).
- Chocolate, especially dark chocolate, keeps a lot of people up.
- Diet pills and nicotine (tobacco or patch) will keep you up at night. Neither is healthy, but if either is part of your life, avoid using it in the evening.
- Other medications can disrupt your sleep—for example, steroids. If a required medicine keeps you awake, ask your doctor if the amount or timing of the medicine can be changed, or if there is a more sleep-friendly, effective alternative.

It's best to stick to herbal teas, cold or hot lemonade, apple cider, or warm milk with a touch of honey. Seek beverages that soothe you, relax you, and make you sleepy. Avoid or limit alcohol consumption.

Set the Stage for Sleep

Just like anything else you do, you do it best when you're in the mood for it: eating, talking, listening, having sex, doing sports, reading—and sleeping. Here are some things you can do to get you in the mood for sleep:

- Massage your neck or legs.
- Take a warm bath.
- Daydream.
- Meditate.
- Try a light snack to satisfy late night hunger. Avoid anything heavy, spicy, or very sweet.

KEEP YOUR BEDROOM WORRY-FREE

To disassociate cancer-related anxieties from your bedroom and nighttime routine, establish your bed, and night, as a worry-free zone.

- Leave your bedroom when anxiety hits. If you wake up with lists of things to do or worry about and can't get back to sleep, get out of bed and go to another room if necessary.
 - Write down your chores, tasks, and problems. Park your fears and worries on paper, and commit yourself to dealing with them the next day. Daytime is always much better than nighttime to deal with these issues.
 - Make an appointment with yourself, a daily date with your worries. Take this task seriously—go over that list in the daytime, manage the worries that you can, and postpone those you need to work on further.
 - Let someone else take over your worries for you. (My niece makes little worry dolls: you whisper your worries to the doll and let the doll work on your problems.)
 - Return to your bed only after you've parked your fears somewhere else.
- Don't indulge in overstimulating experiences just before bedtime, like television news or action shows, or late-night exercise. (Sex, however, may help you get to sleep.)
 - Avoid fluids near bedtime so you don't have to go to the bathroom in the middle of the night. Once up, you may have trouble getting back to sleep.
 - Try cooling down your bedroom at night.
 - Keep your room dark, soothing, and quiet. Curtains, blinds, a face mask, and silicone earplugs all may help. Darkness increases your brain's production of melatonin, the "sleep hormone."
 - Be sure to have a comfortable, suitable mattress, adequate covers, and good pillows.
 - Treat yourself to a new nightgown or pajamas.
 - Turn your clock to the wall. Too much attention to how much time you're awake may only reinforce sleeplessness.
 - Try a pillow over your eyes and ears to help block out noise and light (an old thin down pillow works great).

- Get your family to cooperate with your need for quiet, for sleep. Your motto can be “I’ll protect your sleep if you guard mine.”
- Try white noise—that’s the kind of sound that makes your mind relax while it drowns out other noise. A whirring fan can work well, soothing you to sleep.

If your bedroom has become polluted by troublesome nighttime fears, change the scene. Rearrange the furniture, paint the walls another color, or cheer things up with a new quilt and sheets. You might even want to choose a different bedroom if possible.

Manage In-Bed Activities

When you have trouble sleeping, only use your bed for sleep or sex. If you’re trying to sleep and you can’t, you should leave your bed for a while. Try doing something relaxing or boring for thirty minutes, and then try again to fall asleep.

- Don’t toss and turn for more than twenty minutes.
- Read a soothing or dull book or watch TV somewhere else.
- Count backward from 100. Count sheep, horses, or dogs if that works for you.
- Sing a familiar song to yourself, over and over.
- Concentrate on thinking the words *in* and *out* with every breath that comes in and goes out.

When it comes to sex, avoid nights when you have to get up early for work. I’ve told more than one patient who really needed her rest to hang a Do Not Disturb or Not Tonight sign over the bed. (That deal works as long as there is another side to the sign that says Tonight’s the Night.)

Snore Stoppers

Snoring—your own, your partner’s, or both—can be a huge problem that must be worked out.

- Experiment with earplugs until you find a kind that works for you.
- Find the sleep position that stops the snore. Sleeping on one's back usually makes snoring worse; sleeping on one's side often resolves the snoring.
- Consider wearing a belt with a big buckle turned onto your back to keep you from rolling onto your back.
- Consider one of those much-advertised snore stoppers: strips, straps, pillows. They may help; they can't hurt. But stay away from sprays—they can be harmful.
- Take charge of your partner's chin if he/she is a lip rattler (like mine ☺). Reach over and pull the chin down, and pray that it doesn't start up again.
- Move you or your partner to a couch if the snoring won't stop or it keeps restarting. Or it might be easier for you to find or set up a spare bedroom.

If the snoring persists as a significant issue, check with a doctor for a more serious medical approach. Your local hospital probably has a sleep specialist—usually in the pulmonary department (that's lung medicine).

Apnea Management

Sleep apnea can be a critical problem. Its proper diagnosis is usually established by an overnight sleep study, where the subject comes in to sleep at least one night under observation. Treatments are customized based on the specific type of apnea, and usually involve one or more of the following solutions:

- Weight loss—a major way of dealing with this problem.
- CPAP—a machine that provides continuous positive airway pressure through a specialized face mask. This is the gold standard of sleep apnea treatment. The machine may be rented or purchased, depending on your insurance. But it only works if you use it on a regular basis.
- Position therapy, similar to that recommended for snoring; techniques to keep the sleeper on her side and off her back.

- Oral appliance applied to the teeth, to pull the lower jaw forward. As devices go, the CPAP is more effective, but an appliance seems to work for some mild or average cases.

Surgery is kind of a last resort. There are various procedures to keep the airway unblocked, but we don't have positive proof of long-lasting results.

Sleep Medicine

By following the sleep hygiene suggestions outlined in this section, most sleep challenges can be improved or resolved. If you are still experiencing sleep challenges despite all your efforts, you might find yourself headed to the medicine cabinet.

Over-the-counter drugs for sleep usually contain diphenhydramine (benadryl)—bad news! This medicine may make you sleepy at first, but it disrupts sleep stages and you may wake up feeling hung over. Read labels, especially for heavily advertised sleep aids such as Tylenol PM. Also, diphenhydramine can interfere with tamoxifen's effectiveness (see Chapter 7).

It's better to ask your doctor for a prescription. Our expert recommends a medication that functions like the sleep hormone melatonin: Rozerem. Over-the-counter melatonin products should be avoided.

NAPS

If you are tired during the day, try a catnap, but beware of long naps—you'll pay for them later. You'll be wide awake in the middle of the night, wondering why you can't sleep. Most sleep experts advise against napping unless it's absolutely necessary because it can compete with your nighttime sleep. But, if you must have a nap in the daytime:

- Limit the nap to no more than thirty minutes, so you'll get some rest without falling into deep sleep, which could interfere with deep sleep at night. (If you wake up groggy from your nap, you are waking from deep sleep: you've napped too long.)
- Have the nap before two in the afternoon, to avoid spoiling your nighttime sleep.
- Schedule the nap for the same time each day if you need them on a regular basis.

Rest needs to be balanced with activity. Too much rest can undermine your resolve to keep moving. It's too easy to fall into a comfortable pattern of sitting back with a book or TV instead of braving the outdoors or getting on a treadmill.

If mild discomfort or hot flashes are keeping you up or waking you up, acetaminophen (Tylenol) or ibuprofen (Advil) might be enough to help you get to sleep. If transient anxiety is responsible for your sleeping problems, ask your doctor about a suitable solution—including medication if appropriate.

If your insomnia is nonspecific (not due to any particular cause or reason) and Rozerem doesn't do it for you, occasional use of something like short-acting Ambien or Lunesta can be helpful. Follow doctor's orders and don't take it more than two times a week or your body will get used to it and it may lose its effectiveness.

Most effective sleep medications can be obtained only with your doctor's prescription and should only be taken with your doctor's approval. Never borrow pills from a family member or friend. Stay away from alternative medications for sleep. Herbals and supplements are not regulated by the FDA, so you can never be sure of what's inside that bottle.

When to Seek a Sleep Consultation

If nothing in what you have read in this chapter helps you, if your sleep is still troubled and inadequate, it's probably time for you to seek help from a professional accredited sleep therapist or clinic. Many hospitals now have such resources available to the community. If you have no such local facility, contact the nonprofit National Sleep Foundation on the Web for help (www.sleepfoundation.org). If you are suffering from insomnia and can't find a specialized therapist or clinic near you, a good physician may be able to help you address the issue.

Moving Forward

Your sleep may never end up as perfect as you might hope. Our expert, Dr. Helena Schotland, says, "Don't shoot for perfection; shoot for improvement. Decrease the pressure on yourself about not being able to fall sleep. Ask yourself, what's the worst thing that can happen? So what if you don't get enough sleep on one particular night? Tell yourself that you can always make it up. We look for small steps that add up to something helpful."