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## SLEEP WELL, FEEL WELL

Our overall health needs a good night's sleep - we feel less stress, are better able to concentrate and remember things, have lower blood pressure, and healthier immunity. An occasional bad night's sleep isn't a problem; it happens to us all. When we have trouble sleeping for more than a week or two, it can start to affect our day-to-day life.

There are effective treatments for insomnia and other sleep-related problems, and many veteran specific supports available to you if you are having trouble sleeping.

This brochure gives you information to help you understand what healthy sleep is, when it's best to seek help for a sleeping problem and which treatments are most helpful.

**Insomnia is when you have trouble falling asleep, staying asleep or you wake early in the morning and have trouble going back to sleep. Chronic insomnia is when this happens on at least 3 nights a week for 3 months.**

### What is healthy sleep?

Healthy sleep occurs in a series of 90 to 120 minute cycles. Each cycle has different stages of sleep ranging from a light sleep to a deep sleep. Each cycle includes rapid eye movement (REM) sleep, when dreaming is more likely. It is normal to be awake for a short period of time between each cycle. You may or may not remember being awake.

The amount of sleep we need changes with age. Most adults need 7 to 9 hours of sleep each night. Sleeping less is normal as we get older. The sleep cycles also include less deep sleep and more light sleep. Despite these changes, older people are able to function well in daily life.

## ❓ When should I seek help if I have trouble sleeping?

If you are concerned that you are not sleeping well and think it is lessening the quality of your day-to-day life, talk to your GP.

### **Do you answer yes to any of these questions? If these things bother you, it is a good idea to talk to a GP about your sleep**

- Do you have trouble falling asleep or staying asleep, or do you wake early in the morning and have trouble going back to sleep?
- Do you have nightmares, or avoid sleep for fear of having nightmares?
- Have you had trouble sleeping on at least 3 nights a week for 3 months or more?
- Do you feel like you have had little or no sleep when you get up in the morning?

- Does your lack of sleep make it hard for you to pay attention, concentrate or to remember things?
- Are you excessively tired during the day?
- Do you worry about not getting enough sleep?

Your GP can rule out any underlying medical causes and help you to develop a treatment plan that suits you. Your GP may ask you to use a sleep diary. Fill it out to show your sleep patterns, and whether any lifestyle factors are affecting your sleep.

### **Online resources for sleeping**

- The DVA *High Res* website 'Healthy Sleeping' section can offer you tailored advice and tips for improving your sleep  
<https://highres.dva.gov.au/highres#!/tools/healthy-sleeping>
- *Open Arms* 'Sleeping better' is a free educational and skills-based group program to help you manage sleeping issues  
[www.openarms.gov.au/get-support/group-programs/sleeping-better](http://www.openarms.gov.au/get-support/group-programs/sleeping-better)
- *Open Arms* Veterans and Families Counselling Webinar 'Sleep Disturbance – Getting a good night's sleep'  
[www.youtube.com/watch?v=AKISyfXTkxM&](http://www.youtube.com/watch?v=AKISyfXTkxM&)
- *Sleep Health Foundation* fact sheets [www.sleephealthfoundation.org.au/public-information/fact-sheets-a-z.html](http://www.sleephealthfoundation.org.au/public-information/fact-sheets-a-z.html)

## ? Which treatment works for insomnia?

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The most effective way to treat insomnia is by identifying the causes and investing time to fix them. Cognitive behavioural therapy for insomnia (often referred to as CBTi) is the best way to do this. This therapy can be offered face-to-face with a psychologist, either individually or in a group program, or through online programs which your GP can guide you through.

Cognitive behavioural therapy for insomnia:

- identifies and resolves unhelpful thoughts about sleep
- helps you build healthy habits that promote sleep such as frequent exercise early in the day, avoiding caffeine and napping close to bedtime, and using the bedroom only for sleep purposes

- limits the time spent in bed while not asleep
- uses relaxation techniques such as breathing, mindfulness, meditation and visual imagery
- builds and strengthens the association between the bedroom and sleep.

Many patients report that they prefer this treatment approach as it offers a long-term and safer solution rather than taking medicines to help them sleep. This therapy has also been shown to work very well for DVA patients with post-traumatic stress disorder (PTSD).



## Free treatment with a mental health professional for DVA patients

- DVA funds treatment for any mental health conditions, including sleep problems that can be treated with CBTi, and the condition doesn't need to be related to your service.
- This Non-Liability Health Care is available to anyone who has served as a member of the Australian Defence Force (ADF) and may also be available to Reservists.
- More information is available at: [www.dva.gov.au/health-and-wellbeing/mental-health/non-liability-health-care](http://www.dva.gov.au/health-and-wellbeing/mental-health/non-liability-health-care) or call DVA on 1800 VETERAN (1800 838 372).

## ? Is there a place for medicines for insomnia?

Non-medicine treatment options, like cognitive behavioural therapy for insomnia, are better than using medicines because they address the underlying cause of the insomnia and can offer a long-term solution without the side effects. If they are needed, medicines for sleep (often called sedatives, hypnotics or benzodiazepines) should be used for a short time only.

Medicines for sleep increase the total sleep time by only a small amount and may not improve the quality of your sleep. There is little evidence that they work if they are taken long-term. They can also cause side effects such as daytime drowsiness, dizziness, memory impairment, depression, poor concentration, and increase the risk of motor vehicle accidents.

If you are using medicines for sleep, ask your doctor about stopping and other management options. Medicines for sleep need to be stopped gradually. Some people may have worse sleep initially when reducing the dose of their medicines for sleep. This is normal, will subside over time, and isn't a reason to start taking them again. You may believe you can't sleep without them, but your sleeping tablets only increase the length of time you sleep by a small amount. Many people report better quality of sleep once they stop taking their sleeping tablets.

**Always talk to your GP before stopping, starting or changing any of your medicines. Do not mix your medicines for sleep with alcohol.**