Philadelphia Japanese Association JAGP "Sleep Consultation Seminar"

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English translation is available practical section only

Sleep as an Object of 'Desire'

- There are desires such as desire for money and desire for honor...
- Physiological three great desires → appetite, sexual desire, sleep desire

- Purpose of eating: intake of nutrition
  → but overeating also occurs
- Purpose of reproduction: preservation of species → but...
- Purpose of sleep: rest of the brain → but...

- Each of them can be regarded as 'desires' because it is itself a 'pleasure', thus it becomes an end or a purpose by itself, and tends to be excessively pursued.

→ If appetite is only for nutrition, it would be enough to have the same minimal meal every day, not a delicious one.

- Reference: Kenji Miyazawa 'Ame ni mo Makezu'

Some problems of adult sleep are problems of desire

Various Sleep Problems

1. Cannot sleep type
2. Sleepy type
3. Shifted time type
4. Problems during sleep type
5. No symptoms about sleep
   but problems arise from such as sleep deprivation

1. Cannot Sleep Type

There are four kinds of inability to sleep:

→ Difficulty falling asleep (initial insomnia)

→ Waking up in the middle (middle insomnia)

→ Waking up early in the morning (early morning awakening)

→ Not sleeping deeply (nonrestorative sleep)

Young people: difficulty falling asleep → night type / excitement

Elderly people: mostly others → staying too long in bed

Sleepy Disease and Cannot Sleep Disease

- Among specialists, it is no longer called insomnia just because one cannot sleep at night → must be accompanied by daytime symptoms

- In elementary school children and younger, insomnia symptoms are rare → should suspect some disease
- In junior high school and above, first check sleep hygiene
- In elderly: suspect 'Sleep Desire Disease'!

2. Sleepy Type

- Mostly it is sleep deprivation → check sleep time!

- In adult, OSA (obstructive sleep apnea) should be considered.

- Naps until kindergarten age are normal
- In elementary school children, dozing in class requires caution
- In junior high school and above, check sleep habits

- Narcolepsy often occurs in elementary and junior high school students

3. Shifted Time Type

- **Mostly night type + sleep deprivation**
- **(Difficulty falling asleep + difficulty waking up)**

- **→ Record a sleep diary! Proceed to sleep hygiene guidance**

- **Rarely there are organic diseases.**
- **Also be careful about depression (depressive state)!**

4. Sleepwalking / Parasomnia Type

- Young people: mostly harmless
- → Sleepwalking, night terrors
- → Bedwetting
- → Talking in sleep, teeth grinding
- → Night eating, snoring, etc. require caution!

- Elderly people: REM sleep behavior disorder, dementia

5. Cases Without Sleep Symptoms

- 1. Sleep apnea syndrome (snoring)
- → In children: daytime restlessness etc. may be the only symptom
- 2. Inadequate sleep hygiene / sleep deprivation syndrome
- → No awareness of sleep problems
- 3. Other cases with only nonspecific symptoms such as lack of energy

Common Sleep Disorders (Adults)

- **Despite enough sleep, sleepy during the day**

→ Sleep apnea syndrome (OSA)

→ Narcolepsy

- **Difficulty falling asleep, leading to absence from school or work**

→ Depression

→ Restless legs syndrome (RLS)

→ Delayed sleep-wake phase disorder (DSWPD)

- **Abnormalities during sleep, severe sleepwalking**

→ REM sleep behavior disorder (RBD)

→ Sleep related eating disorder (SRED)

How to Cope When You Cannot Sleep

12 Guidelines for Coping with Sleep Disorders

1. Required sleep time differs for each person; if not troubled by sleepiness, it is sufficient
Some people need long sleep, some short; varies with season; do not cling to 8 hours
With aging, the required sleep becomes shorter

2. Avoid stimulants, relaxation method before bed
Avoid caffeine within 4 hours before bed, avoid smoking within 1 hour before bed
Light reading, music, bath, fragrance, stretching

3. Go to bed when you become sleepy; do not obsess too much about bedtime
Trying too hard to sleep makes the mind alert and worsens falling asleep

4. Wake up at the same time every day
Not early to bed, early to rise, but early rising leads to early bedtime
Staying long in bed on Sunday makes Monday morning hard

5. Use light for good sleep
When you wake, bathe in sunlight, switch on biological clock
At night, keep lighting not too bright

6. Three regular meals and regular exercise habits
Breakfast is important for awakening mind and body, late-night snacks should be light
Exercise habits promote deep sleep

7. If napping, do it before 3 p.m., 20–30 minutes
Long naps make you groggy
Naps after evening negatively affect night sleep

8. If sleep is shallow, rather actively go to bed late and get up early
Spending too long in bed reduces feeling of deep sleep

9. Loud snoring, breathing pauses during sleep, leg jerks or restless feelings need caution
Underlying sleep disorder, requires specialist treatment

10. If strong sleepiness persists despite sufficient sleep, consult a specialist
Even long sleep, if daytime sleepiness affects work or study, consult a doctor
Be cautious with driving

https://www.suimin.net/data/guide.html

12 Guidelines for Coping with Sleep Disorders (continued)

11. Nightcap instead of sleeping pills causes insomnia
Alcohol as substitute reduces deep sleep, causes waking at night

12. Sleeping pills are safe if used correctly under doctor's instruction
Take at fixed time before bed
Do not combine with alcohol

Know the Principles of Sleep and Sleep Well

1. To become sleepy, stay awake
→ Do not nap if difficulty falling asleep
Do not go to bed too early, no second sleep in morning

2. Use the waves (rhythm) of sleepiness
→ Large wave, medium wave, small wave etc.

3. Use the mechanism of the brain
→ When brain temperature drops, you become sleepy

4. Autosuggestion is also effective
→ Make up your mind to sleep

5. If still impossible, use medication...

Tips for Proper Use of Sleeping Pills

1. Do not take for 'Sleep Desire'
2. Choose according to type of insomnia
   Difficulty falling asleep, waking in middle,
   waking early, cannot sleep deeply

3. Not too early: take when just getting sleepy
4. Not too late: if too late, give up

5. Do not increase amount on your own: endure with 70% effect
6. Be careful when stopping
   Falling asleep becomes difficult (rebound insomnia)

7. Do not force to stop
   Better than a lot of alcohol, healthier

Types of Sleeping Pills (1)

Traditional (Old) : Barbiturates

Addictive, tolerance develops, close to anesthesia

Strong respiratory suppression, narrow safety margin, dangerous

Present 1: Drugs acting on benzodiazepine receptors

Anxiolytic effects, safe, classified by duration of action

Present 2: Two new mechanisms

Anti-orexin receptor drugs: current mainstream, safe

Melatonin receptor agonists: safe, weak effect

Over-the-counter: Antihistamines

Cold medicine ingredients, side effect of drowsiness

Only for short-term and mild cases

Types of Sleeping Pills (2)

#Present 1: Drugs acting on benzodiazepine receptors

Basically chosen by length of action

Very safe, but misuse can cause dependence

Ultra-short-acting (3–4 hours): Myslee, Lunesta etc.

Short-acting (7–10 hours): Lendormin, Evamyl, Depas etc.

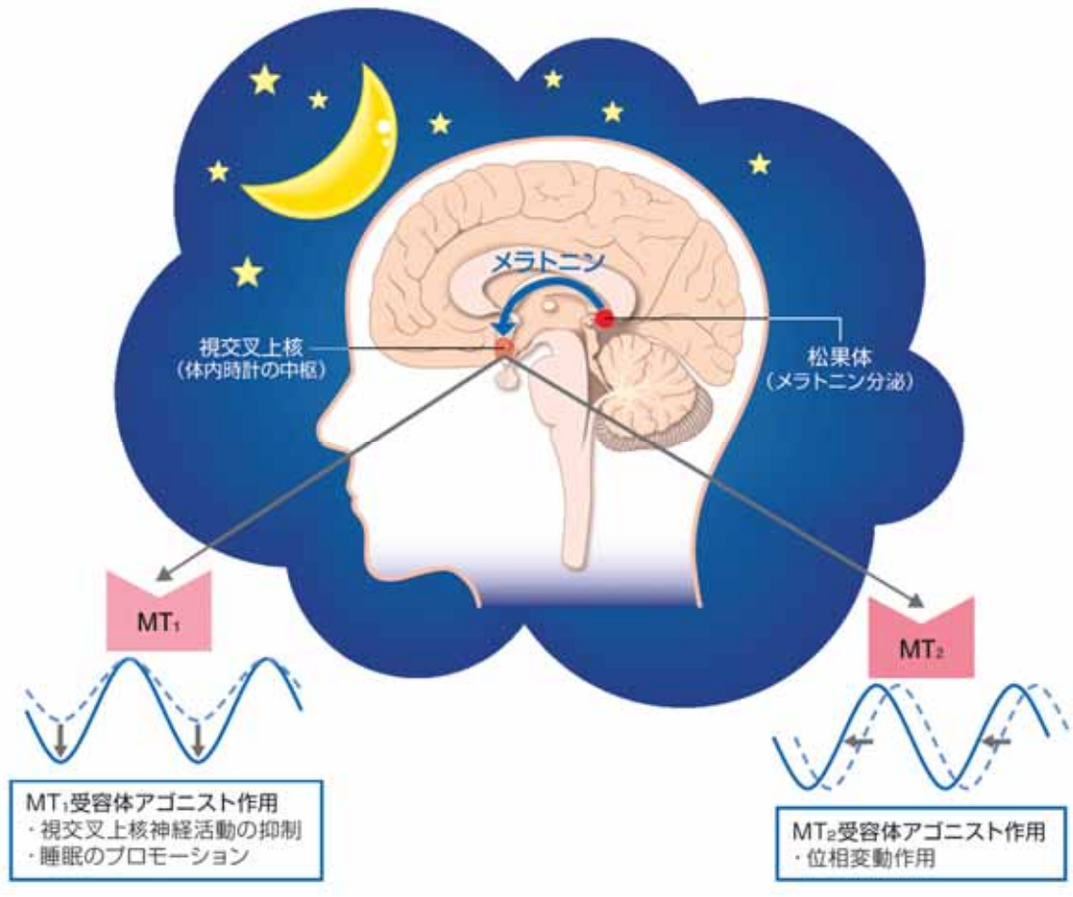
Intermediate-acting (15–20 hours): Rohypnol, Benzalin, Eurodin etc.

Long-acting (24 hours–): Doral etc.

Types of Sleeping Pills (3)

- Present 2: New mechanisms of sleeping pills
- Melatonin receptor agonist: Rozerem™ (Ramelteon)

- Dual Orexin receptor antagonists:
  Dayvigo (Eisai)
  Belsomra (MSD → Daiichi Sankyo)
  Quviviq (Shionogi)
  Another orexin drug coming soon



Side Effects and Problem of Sleeping Pills

- Carryover effect: drowsiness remains the next day
- If excessive, energy decreases → vicious cycle

- Rebound insomnia: difficult to sleep on the day it is stopped
- After discontinuation, need to endure for a while

- Limit of effect: relies on natural sleep circuits
- When arousal level is too strong, you cannot sleep