Sleep: Why We Need It, How to Get It

Celebrating a Second Chance at Life Survivorship Symposium

May 3-9, 2025

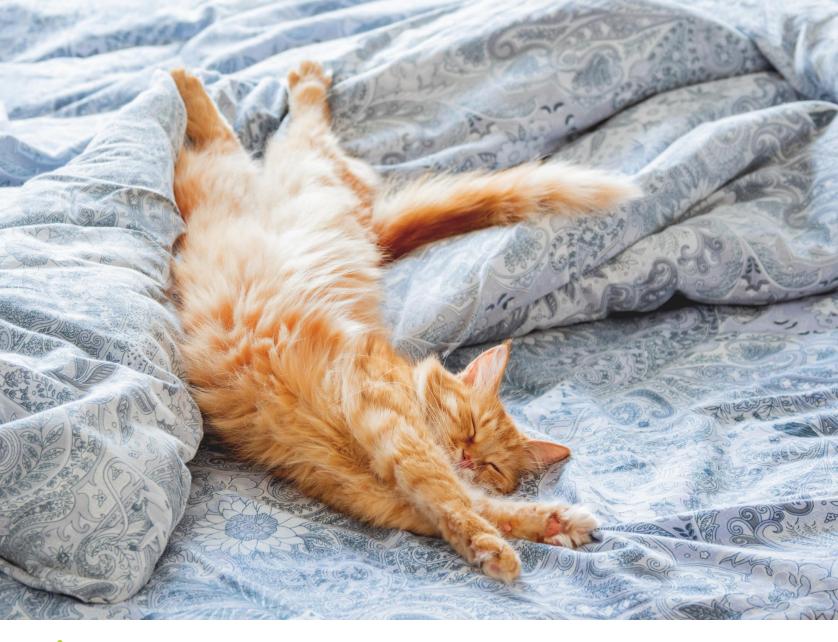


Rina Fox, PhD, MPH University of Arizona College of Nursing



Let's talk about sleep.





What is "sleep disturbance"?



Sleep is a nonnegotiable biological state required for the maintenance of human life ... our need for sleep parallels that for air, food, and water.





Is sleep important?

Sleep is a non-negotiable, universal biological need

And yet... we live in a society that often sees sleep as an unproductive use of time

This has led to societal pressures that devalue sleep

And, more recently, a reawakening to the importance of sleep health







5 Main Types of Sleep Disorders

- Insomnia
- Sleep apnea
- Hypersomnia
- Circadian rhythm disorders
- Parasomnia

INSOMNIA

- Difficulty falling asleep
- Difficulty staying asleep
- Waking up too early
- Bothersome
- Interferes with life



Recommended Hours of Sleep 24 20 16 12-16 -11-14 12 10 - 139-12 8-10 8 - 7 or more Infant **Toddler** Preschool School-age **Adult** Teen 6-12 years 4-12 months 1-2 years 3-5 years 13-18 years 18+ years Source: American Academy of Sleep Medicine

How much should I be sleeping anyway?



Common Questions and Answers

- Q. How common is sleep disturbance?
 - A. Very common
- Q. Who experiences it?
 - A. Across ages, sexes, disease types, treatments...
- Q. When does it happen?
 - A. All phases of the cancer trajectory
- Q: How long does it last?
 - A. Can last for years



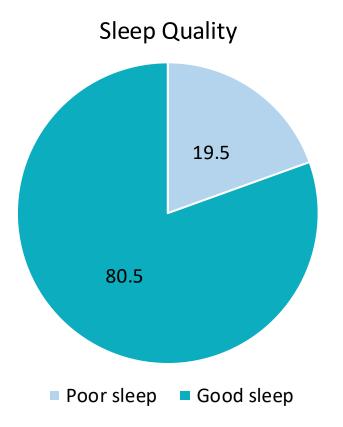
31% breast 20% prostate

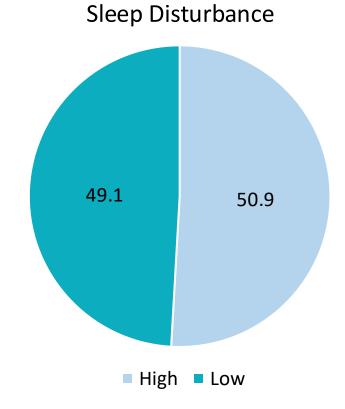
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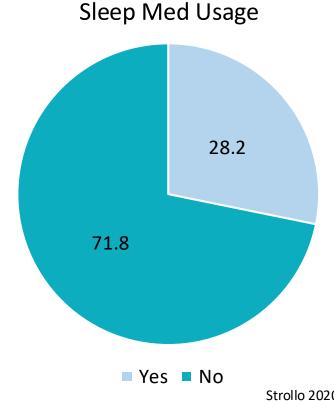
32% "Other Female"

17% "Other Male"

9 years post-diagnosis







Strollo 2020 Sleep Med

2025 SURVIVORSHIP SYMPOSIUM

Why Is Poor Sleep Common in Cancer and Transplant?

We don't know for sure

Some things that may contribute:

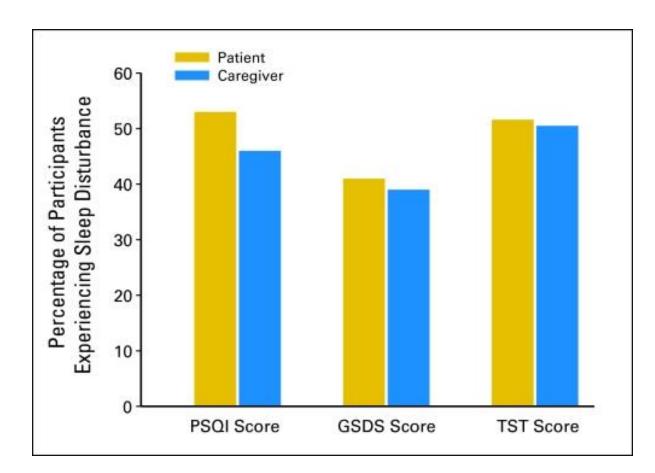
- Disease itself
- Psychological factors
- Pain
- Medications
- Treatments

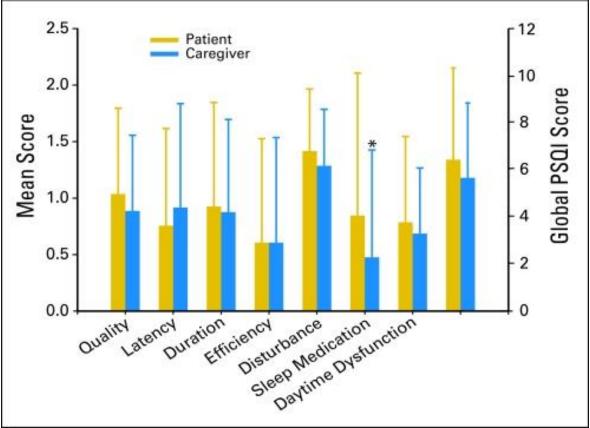


What impact does poor sleep have?

- Reduced quality of life
- Fatigue
- Depression
- Anxiety
- Vasomotor/endocrine symptoms
- Cognitive impairment
- Mortality







It's not just the patients

Carney et al., 2011, J Clin Oncol.



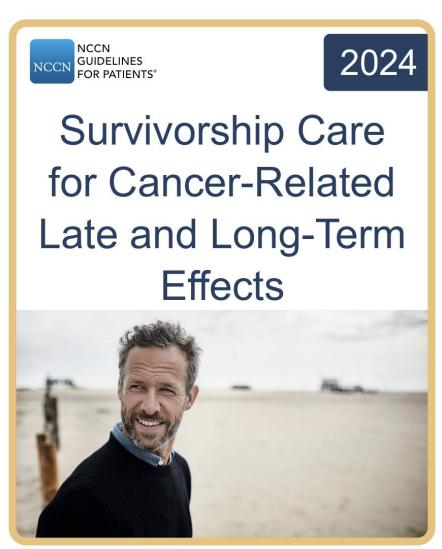
So, what can I do about it?

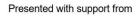


What are some things you have done to help you sleep?



NCCN
Guidelines for
People Who
Have Had
Cancer







Available online at NCCN.org/patientguideline

nccn.org/patients/guidelines/content/PDF/survivorship-crl-patient.pdf



NCCN Guidelines: Sleep Hygiene

Sleep hygiene combined with other treatments for insufficient sleep syndrome, insomnia, and restless legs syndrome

During the day

- Be physically active in the morning, afternoon, or both
- Seek out bright light during the day, especially in the morning
- Limit caffeine intake during the day
- If needed, take 1 nap in the afternoon for less than 30 minutes

Before bedtime

- Don't consume caffeine at least 4 hours before bedtime
- Don't drink alcohol or consume nicotine before bedtime
- Avoid bright light at night and turn off devices near bedtime
- · Don't eat heavy meals and limit fluids 3 hours before bedtime

During bedtime

- Stick to a regular bedtime and waketime
- Sleep in a dark, quiet, and comfortable place
- Don't look at the clock during the night



NCCN Guidelines: Medication

Medication for insomnia

- Zolpidem
- Zaleplon
- Eszopiclone
- Ramelteon
- Temazepam

- Doxepin
- Suvorexant
- Lemborexant
- Daridorexant



NCCN Guidelines: Cognitive Behavioral Therapy

Cognitive behavioral therapy for insomnia

- Limit activities in bed to sleep and sex
- Limit time in bed to the amount of time sleeping
- Change unhelpful beliefs about sleep
- · Calm your body and mind





TIPS FOR BETTER SLEEP





AVOID CONSUMING ALCOHOL
AND NICOTINE BEFORE
BEDTIME



DO NOT WATCH TV OR WORK
ON YOUR COMPUTER AND
DO NOT USE GADGETS
BEFORE BEDTIME



DRINKING A WARM CUP OF TEA WITH CHAMOMILE OR GLASS OF MILK



AVOID LIGHTS WHEN TRYING TO SLEEP



AVOID OVEREATING AT DINNER AND AVOID CONSUMING CAFFEINE IN THE LATE AFTERNOON



READ A BOOK OR LISTEN TO A RELAXING MUSIC



16 - 24°C
COMFORTABLE TEMPERATURE
IN THE BEDROOM



WAKE UP AND GO TO BED AT THE SAME TIME. SLEEP 7-8 HOURS

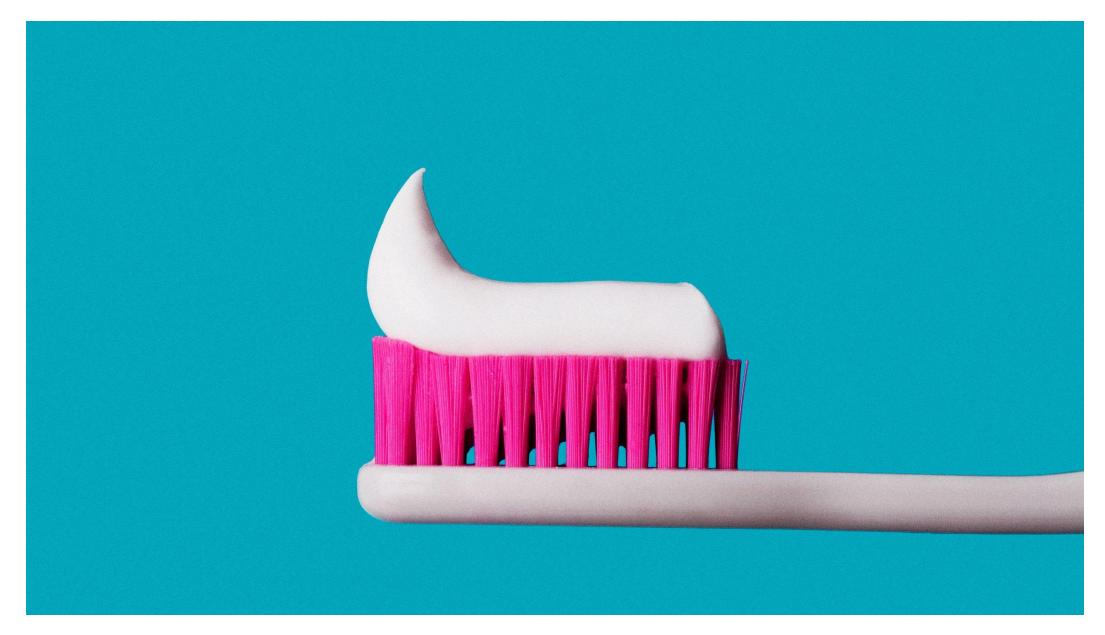


STOP EXERCISING FOUR HOURS BEFORE BEDTIME



TAKE A WARM BATH OR SHOWER BEFORE BEDTIME







Sleep Aids



Among the most frequently prescribed psychotropic prescriptions



CBT-I: The Gold Standard





Cognitive Behavioral Therapy for Insomnia (CBT-I)

Components:

- Changing your sleep schedule
- Changing what you do when you can't sleep at night
- Addressing your thoughts about sleep
- Sleep education
- Sleep hygiene
- Relaxation strategies
- Optional: medication taper



What does CBTI-I look like?

- Structure is similar to other types of CBT
- Once a week interactive sessions with a therapist
 - Sometimes less frequent
- Typically, 4-8 sessions/modules
- Medications work faster, CBT works longer



Finding a Behavioral Sleep Medicine Provider

- Society of Behavioral Sleep Medicine behavioralsleep.org
- International Directory of CBT-I Providers cbti.directory
- Online programs/apps also available



Mindfulness-Based Treatments

- Meditation
 - Present-moment focus
- Acceptance, patience, openness...
- Integration into daily life
- Can reduce sleep disturbance and fatigue in cancer patients more than usual care





Bright Light

- Commonly used to treat seasonal affective disorder
- Systematic exposure to bright light may normalize circadian rhythms
- Some evidence that it can help decrease sleep disruption
- Goal = for light to approximate/be similar to sunlight (typically equivalent to approx. 10,000 lux)"

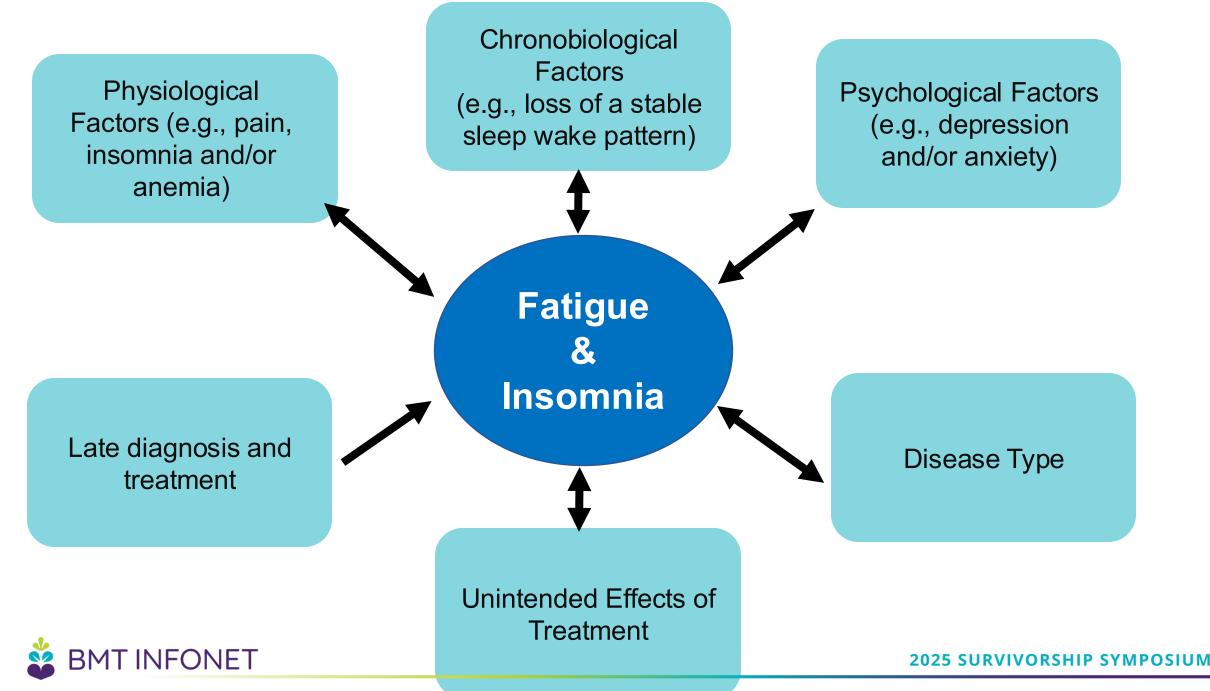






A quick thought about fatigue





Thanks to Dr. Lisa Wu, Dr. Michael Grandner, and Dr. Alexandria Muench for contributing to these slides





Michael Grandner, PhD



Alexandria Muench, PsyD





Thank you for listening!



Questions?



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Let Us Know How We Can Help You



Visit our website: bmtinfonet.org

Email us: help@bmtinfonet.org

Phone: 888-597-7674 or 847-433-3313

