Individual Planning: A Treatment Plan Overview for Individuals Sleep Disorder Problems.

Spend at least one hour developing different treatment plans.

Sleep Disorders:
Sleep disorders involve any difficulties related to sleeping, including difficulty falling or staying asleep, falling asleep at inappropriate times, excessive total sleep time, or abnormal behaviors associated with sleep.

Causes, Incidence, and Risk Factors:
More than 100 different disorders of sleeping and waking have been identified. They can be grouped in four main categories:

- Problems with falling and staying asleep (insomnia)
- Problems with staying awake (excessive daytime sleepiness)
- Problems with sticking to a regular sleep schedule (sleep rhythm problem)
- Unusual behaviors during sleep (sleep-disruptive behaviors)

PROBLEMS WITH FALLING AND STAYING ASLEEP:
Insomnia includes any combination of difficulty with falling asleep, staying asleep, intermittent wakefulness and early-morning awakening. Episodes may come and go (be transient), last as long as 2 to 3 weeks (be short-term), or be long-lasting (chronic).

Common factors associated with insomnia include:
- Physical illness
- Depression
- Anxiety or stress
- Poor sleeping environment such as excessive noise or light
- Caffeine
- Alcohol or other drugs
- Use of certain medications
- Heavy smoking
- Physical discomfort
- Daytime napping
- Counterproductive sleep habits:
  - Early bedtimes
  - Excessive time spent awake in bed

Disorders include:
Psycho-physiological insomnia: a condition in which stress caused by the insomnia makes it even harder to fall asleep

Delayed sleep phase syndrome: your internal clock is constantly out of synch with the "accepted" day/night phases; for example, patients feel best if they can sleep from 4 AM to noon

Hypnotic-dependent sleep disorder: insomnia that occurs when you stop or become tolerant to certain types of sleep medications

Stimulant-dependent sleep disorder: insomnia that occurs when you stop or become dependent on certain types of stimulants

PROBLEMS WITH STAYING AWAKE:

Disorders of excessive sleepiness are called hypersomnias. These include:

- Idiopathic hypersomnia (excessive sleepiness that occurs without an identifiable cause)
- Narcolepsy
- Obstructive and central sleep apnea
- Periodic limb movement disorder
- Restless leg syndrome

PROBLEMS STICKING TO A REGULAR SLEEP SCHEDULE:

Problems may also occur when you do not maintain a consistent sleep and wake schedule. This occurs when traveling between time zones and with shift workers on rotating schedules, particularly nighttime workers.

Sleep disruption disorders include:

- Irregular sleep-wake syndrome
- Jet lag syndrome
- Natural short sleeper (the person sleeps fewer hours than normal but has no ill effects)
- Paradoxical insomnia (the person actually sleeps a different amount than they think they do)
- Shift work sleep disorder

SLEEP-DISRUPTIVE BEHAVIORS:

Abnormal behaviors during sleep are called parasomnias and are fairly common in children. They include:

- Sleep terrors
- Sleep walking
- REM sleep-behavior disorder (a type of psychosis in which a person "acts out" dreams so violently that they may injure the person sleeping with them)

Refer for an appointment with a health care provider if lack of sleep, too much sleep, or unusual sleep behaviors are interfering with daily living. Sleep apnea should be suspected in people who snore loudly, wake frequently to urinate at night, and wake up in the morning un-refreshed.

Prevention:

The following can help prevent many sleep disorders.
- Regular sleep habits (such as going to bed and waking at the same time every day)
Behavioral Definitions for Individuals with Sleep Disorder Problems:

Difficulty getting to or staying sleep."
Sleeping adequately but not feeling rested after waking." Predominant daytime sleepiness."
Falling asleep too easily during daytime." Insomnia or hypersomnia problems due to a reversal of the sleep-time schedule normal for the patient's environment."
Distress resulting from repeated awakening." Detailed recall of extremely frightening dreams involving threats to self." Abrupt awakening with a panicky scream followed by intense anxiety and autonomic arousal." No detailed dream recall, and confusion or disorientation." Regular incidents of sleepwalking accompanied by amnesia about the episode." Long Term Goals for Individuals with Sleep Disorder Problems:

Re-establish a restful sleep pattern." Increase refreshed and energetic feelings during wakeful hours." End or reduce anxiety-producing dreams that cause awakening." End or reduce abrupt awakening in terror and regain a peaceful, restful sleep pattern." Re-establish restful sleep with reduction of sleepwalking episodes." Short Term Goals for Individuals with Sleep Disorder Problems:

Explore sleep pattern and its history. " Write a journal of daily stressors and how they may link to the sleep pattern. "

A quiet sleep environment
Regular exercise
Staying generally fit and healthy
Explore history of substance abuse or medication use. "

Refer to a physician to assess organic contributions to sleep disorder and the need for medications. "

Explore depressive feelings and its possible causes." 

Explore experiences of emotional traumas that may disturb sleep. "

Identify disturbing dreams by keeping a dream written journal." 

Explore any fears regarding relinquishing control. " 

Explore any fears of death that may linked to the sleep disturbance. " 

Identify and list current stressors that may be interfering with the sleep problem. " 

Develop a clear plan to deal with stressors proactively. " 

Explore childhood traumatic experiences linked with the sleep experience. " 

Explore any sexual abuse incidents that continue to be disturbing and affects sleep problems "

Explore pre-sleep schedule of events. " 

Teach deep muscle relaxation exercises. "

Use biofeedback training to deepen relaxation abilities. " 

Monitor any antidepressant medication or medications daily for 3 weeks to assess effect on sleep. "

Referral to a sleep clinic for an evaluation. "

Interventions or Strategies for Individuals with Sleep Disorder Problems:

Assess the roots of sleep pattern, including, nutritional habits, bedtime routine, activity level while awake, napping practice, actual sleep time and so on." 

Assign a journal of daily stressors and nightly sleep patterns." 

Explore contribution of medication or substance abuse to the sleep disorder." 

Refer for medical evaluation to rule out physical and pharmacological causes for sleep disturbance and evaluate for medications." 

Explore for depression as cause of sleep disturbance." 

Assess recent traumatic events that impact sleep patterns."
Probe disturbing dreams and relationship to life stress. Instruct patient to keep a dream journal every night."

Explore fears related to letting go of control."

Explore fear of death and how it may contribute to the sleep disturbance."

Identify and list current life circumstances that are causing anxiety that may be interfering with sleep."

Formulate a plan to modify life situations to reduce stress and anxiety."

Assess any traumas of childhood that surround the sleep experience."

Assess for possible sexual abuse that has not been revealed."

Assign a strict sleep induction routine including: daily exercise, low stimulation prior to sleep, relaxation training, bland diet, warm bath, reading a book, and so on."

Teach deep muscle relaxation and deep breathing exercises using audiotape instruction."

Complete an electromyo-graphic (EMG) biofeedback to reinforce successful relaxation response."

Arrange for medical for evaluation to assess any medication to enhance restful sleep."

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