

Common Signs of a Sleep Disorder

Look over this list of common signs of a sleep disorders, and talk to your doctor if you have any of them:

- It takes you more than 30 minutes to fall asleep at night.
- You awaken frequently in the night and then have trouble falling back to sleep again.
- You awaken too early in the morning.
- You frequently don't feel well rested despite spending 7–8 hours or more asleep at night.
- You feel sleepy during the day and fall asleep within 5 minutes if you have an opportunity to nap, or you fall asleep at inappropriate times during the day.
- Your bed partner claims you snore loudly, snort, gasp, or make choking sounds while you sleep, or your partner notices your breathing stops for short periods.
- You have creeping, tingling, or crawling feelings in your legs that are relieved by moving or massaging them, especially in the evening and when you try to fall asleep.
- You have vivid, dreamlike experiences while falling asleep or dozing.
- You have episodes of sudden muscle weakness when you are angry, fearful, or when you laugh.
- You feel as though you cannot move when you first wake up.
- Your bed partner notes that your legs or arms jerk often during sleep.
- You regularly need to use stimulants, such as caffeine to stay awake during the day.

Also keep in mind that, although children can show some of these same signs of a sleep disorder, they often do not show signs of excessive daytime sleepiness. Instead, they may seem overactive and have difficulty focusing and concentrating. They also may under perform in school.

Talk to your doctor or an experienced dentist if you feel any of these apply to you.

Sleep Disorders are often mistaken for other conditions.

You may have a sleep disorder and should see your doctor if your sleep diary reveals any of the following:

1. You consistently take more than 30 minutes each night to fall asleep.
2. You consistently awaken more than a few times or for long periods of time each night.
3. You take frequent naps.
4. You often feel sleepy during the day—especially if you fall asleep at inappropriate times during the day.

Your Guide to Healthy Sleep

Sample Sleep Diary

Complete in the Morning

Name

Today's date **Monday**

4/10/05

Time I went to bed last night 11 p.m.

Time I woke up this morning 7 a.m.

No. of hours slept last night 8

Number of awakenings and 5 times

total time awake last night 2 hours

How long I took to fall asleep 30 mins.

last night

Medications taken last night None

How awake did I feel when 2

I got up this morning:

1—Wide awake

2—Awake but a little tired

3—Sleepy

Number of caffeinated drinks 1 drink at

(coffee, tea, soda) and time 8 p.m.

when I had them today

Number of alcoholic drinks 2 drinks

(beer, wine, liquor) and time 9 p.m.

when I had them today

Nap times and lengths today 3:30 p.m.

45 mins.

Exercise times and lengths None

today

How sleepy did I feel 1

during the day today:

1—So sleepy had to struggle

to stay awake during much

of the day

2—Somewhat tired

3—Fairly alert

4—Wide awake