

FAQs

Sleep Health and Disorders

Frequently Asked Questions

How does sleep affect my health?

Sleep is a key part of staying healthy. Poor sleep can lower your quality of life and affect your long-term health. How well you sleep may depend on your age, lifestyle, and health conditions. Most adults need 7 to 8 hours of sleep per night. Sleep can affect many aspects of your health, including the following:

- Physical health—Too little or low-quality sleep may increase your risk of heart disease, kidney disease, high blood pressure, diabetes mellitus, and stroke. Poor sleep also can affect puberty, fertility, and your immune system.
- **Daily functioning**—Too little or low-quality sleep can cause you to spend more time on tasks, have a slower reaction time, and make more mistakes.
- **Safety**—Too little or low-quality sleep may cause you to get into an accident while driving or while doing dangerous work or activities.

What are common sleep disorders in women?

The most common sleep disorders in women include the following:

Insomnia—Being unable to get enough sleep to feel refreshed, for at least 3 nights a
week for 1 month or longer. It happens even though you are trying to sleep and have
enough time to do so.

- Obstructive sleep apnea—Having many brief pauses in breathing during sleep. This
 happens when muscles in the throat are unable to keep the airway open.
- Restless leg syndrome

 —Feeling a "twitching" or "crawling" in the legs that makes you
 move your legs. The sensation usually happens when lying down or sleeping.

Who is most likely to have sleep disorders?

More women than men have insomnia. Women also are more likely to have problems with sleep during menstruation, pregnancy, the postpartum period, perimenopause, and menopause. This is because changes in hormones during these times can make it harder to sleep.

What are the symptoms of insomnia?

You may have insomnia if you

- have a hard time falling asleep or staying asleep
- are a light sleeper when you do sleep
- feel fatigued during the day
- find your daily functioning or mood worsening
- worry about sleep and what will happen if you do not sleep
- feel like you need to sleep at times that are out of sync with your work or social schedules

What causes insomnia?

Your body runs on a roughly 24-hour cycle called a circadian rhythm. This helps control when you're awake and when you feel ready for sleep. Most people's natural sleep cycles make them fall asleep in the evening. Insomnia can occur if the cycle is altered by

- exposure to light, darkness, or noise
- changes in hormones
- shift work

- use of alcohol or drugs
- stress or anxiety
- · a medical condition or medication that interferes with sleep

What are the symptoms of obstructive sleep apnea?

People with obstructive sleep apnea may snore, gasp, or have brief pauses in breathing while sleeping. Because they do not sleep well at night, they may feel drowsy during the day.

What causes obstructive sleep apnea?

A problem with the airway (throat) leads to obstructive sleep apnea. Muscles in the throat are unable to keep the airway open. When the airway closes, levels of oxygen in the blood drop. You then wake up briefly to reopen your throat (though you may not be aware of it).

Factors that can affect your risk of sleep apnea include

- obesity
- having a large neck (14 inches or greater in women and 16.5 inches or greater in men)
- midface hypoplasia (a condition that affects your jaw)
- menopause
- pregnancy (especially in the third trimester)
- polycystic ovary syndrome (PCOS)
- being male
- older age
- family history

What are the symptoms of restless leg syndrome?

You may have restless leg syndrome if

- you have "crawling" or "twitching" feelings that make you want to move your legs
- the feeling always begins or is worse when you rest
- moving, rubbing, or stretching your legs helps
- the feeling occurs or is worse at night

What causes restless leg syndrome?

Restless leg syndrome is a disorder of the nervous system. The exact cause of restless leg syndrome is not known. Risk factors may include

- iron deficiency
- · being female
- pregnancy
- menopause
- family history

How can menstruation affect sleep quality?

Sleep can be affected by changes in hormone levels. Restless sleep is more likely after ovulation. In the days right before and after bleeding starts, insomnia is common. Cramps and heavy bleeding also may disturb a woman's sleep.

How can pregnancy and the postpartum period affect sleep quality?

Many women have trouble sleeping during pregnancy. This may be because of the many changes their bodies are going through. Levels of estrogen and progesterone increase during pregnancy, which can change sleep patterns. Weight gain also can make the airway swell, leading to snoring and obstructive sleep apnea.

Trouble sleeping also is common after giving birth, as your baby adjusts to a regular sleep schedule. Insomnia or sleep problems after birth also may be caused by

- pain
- breastfeeding

- stress
- postpartum depression

How can perimenopause and menopause affect sleep quality?

Many women have hot flashes during perimenopause and menopause. Hot flashes can make it hard to sleep. Sleep problems reported by women during menopause include

- trouble falling asleep
- trouble staying asleep
- waking up often during the night
- getting up too early

Women also may be more likely to experience mood disorders, sleep apnea, and chronic medical conditions as they age, all of which can affect sleep quality.

What are some self-help options for getting better sleep?

Self-help methods for getting better sleep include

- sleeping only as much as you need to be refreshed during the day
- going to bed and waking up at the same time every day
- avoiding naps during the day
- avoiding caffeine, nicotine, alcohol, and large meals close to bedtime
- exercising regularly (but not right before bedtime)
- making sure your bedroom is not too hot, too cold, or too bright
- removing the TV or computer from your bedroom
- using your bed only for sleep and sex (do not watch TV, listen to the radio, use your phone, or read in bed)

Should I talk with a health care professional about my sleep problems?

Yes, you can talk with your obstetrician—gynecologist (ob-gyn) or other health care professional about your sleep problems. They may screen you for a sleep disorder. You

may be asked whether you

snore

feel sleepy or fall asleep during the day

use sleeping pills

feel depressed or anxious

Some sleep disorders can be diagnosed based on your medical history. Depending on your symptoms, you also may be referred to a health care professional whose specialty is sleep. They may have you do a test called a sleep study. This is an overnight observation of how your body acts when you sleep. Sleep studies are often done to test for obstructive sleep apnea.

What treatment options are available for sleep problems?

Treatments for sleep problems include

lifestyle changes, including weight loss

cognitive behavioral therapy (CBT)

medication

medical devices, such as a mask or mouth guard

Obstructive sleep apnea can be treated with a therapy called continuous positive airway pressure (CPAP) and a mouth piece called a mandibular advancement device (MAD). With CPAP, you wear a mask that helps air flow into the nose or mouth. MAD looks like a mouth guard and is used to reposition the jaw. These devices help keep the airway open during sleep.

Medication is available for restless leg syndrome and for insomnia. Insomnia also is treated with CBT, which can help change your sleep habits and the way you think about sleep and insomnia.

Resources

National Sleep Foundation

https://www.sleepfoundation.org

National organization dedicated to improving health and well-being through sleep education and advocacy.

American Academy of Sleep Medicine

http://sleepeducation.org/find-a-facility

A directory of sleep centers that can help diagnose and treat sleep disorders.

Glossary

Cognitive Behavioral Therapy (CBT): A type of psychotherapy. During CBT, you learn specific skills that help you change the way you think about and cope with problems.

Diabetes Mellitus: A condition in which the levels of sugar in the blood are too high.

Estrogen: A female hormone produced in the ovaries.

High Blood Pressure: Blood pressure above the normal level. Also called hypertension.

Hormones: Substances made in the body that control the function of cells or organs.

Hot Flashes: Sensations of heat in the skin that occur when estrogen levels are low. Also called hot flushes.

Immune System: The body's natural defense system against viruses and bacteria that cause disease.

Kidney Disease: A general term for any disease that affects how the kidneys function.

Menopause: The time when a woman's menstrual periods stop permanently. Menopause is confirmed after 1 year of no periods.

Menstruation: The monthly shedding of blood and tissue from the uterus.

Nicotine: An addictive drug found in tobacco.

Obstetrician—**Gynecologist (Ob-Gyn):** A doctor with special training and education in women's health.

Ovulation: The time when an ovary releases an egg.

Oxygen: An element that we breathe in to sustain life.

Perimenopause: The time leading up to menopause.

Polycystic Ovary Syndrome (PCOS): A condition that leads to a hormone imbalance that affects a woman's monthly menstrual periods, ovulation, ability to get pregnant, and metabolism.

Postpartum: Related to the weeks following the birth of a child.

Postpartum Depression: A type of depressive mood disorder that develops in the first year after the birth of a child. This type of depression can affect a woman's ability to take care of her child.

Progesterone: A female hormone that is made in the ovaries and prepares the lining of the uterus for pregnancy.

Sleep Disorders: Conditions that disrupt normal sleep patterns.

Trimester: A 3-month time in pregnancy. It can be first, second, or third.

If you have further questions, contact your ob-gyn.

Don't have an ob-gyn? Learn how to find a doctor near you.

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