

SLEEP

An information sheet for patients, families and whānau



Sleep is an important part of restoring health during and after blood cancer treatment although it can often be an ongoing problem.

WHAT IS THE CONNECTION BETWEEN SLEEP AND BLOOD CANCER?

Many people receiving treatment for a blood cancer or recovering from one, experience problems sleeping and disruptions to their usual sleep patterns. For many blood cancer patients, the interruptions to normal sleep patterns can be due to the side effects of treatment such as nausea and pain as well as certain treatments like steroids.

A blood cancer diagnosis may turn your normal day-to-day routines upside down. Sudden changes to your lifestyle such as travelling to and from hospital, sleeping in a hospital bed, eating different foods or not being able to eat your usual foods can all impact the quality of your sleep.

The experience of being diagnosed with a blood cancer and the months and years during treatment and beyond can be a very emotionally distressing time. Many people find themselves dealing with psychological issues such as anxiety and low mood, which can become worse from a lack of solid, regular sleep. It is important that you talk to your haematologist and healthcare team about any symptoms of sleeplessness to find the best option for getting your sleep back into a normal routine.

Sleep requirements

Each person has different sleep requirements, which can be dependent on genetics, life stage, medical conditions, and other factors. The average amount of sleep needed is around 7.5-8.5 hours of sleep per 24 hours, which is around one third of the day.

The stages of sleep

When you drift off to sleep, you immediately enter the first stage of sleep, which is a transition stage between alertness and falling asleep. It is easy to be roused from this stage by things like background noises and voices.

The second stage signals the onset of sleep where your body temperature and blood pressure drop and your breathing and heart rate slow down. By the third stage, your muscles relax further and you are less able to respond to external activity. This is the deepest and most restorative stage of sleep.

REM (rapid eye movement) occurs after the 3 stages of sleep, approximately every 60-90 minutes. It occurs during the light stage of sleep when the body is paralysed but the mind remains very active.

What is insomnia and what causes it?

Many people experience insomnia at some point during their lives however the chance of developing insomnia may increase in blood cancer patients.

Insomnia usually occurs when a person experiences persistent sleep problems lasting longer than one month and has difficulty falling asleep, waking in the night or waking early, with noticeable effects the next day. Insomnia can be caused by mental health and medical conditions, unhealthy sleep habits, specific substances, and/or certain biological factors. Insomnia often causes other cancer-related conditions and symptoms to worsen, including pain, fatigue, depression or anxiety. Thinking styles such as perfectionism, overthinking, and the desire for control can also contribute to insomnia in some people. It is important to seek advice from your medical team to treat the underlying causes.

What are the effects of insomnia?

- Low mood and irritability.
 - Poor memory and concentration.
 - Trouble staying alert.
 - Anxiety about not sleeping.
 - Low work performance.
 - Conflict in relationships.
 - Poor quality of life.

What can you do to improve the quality of your sleep?

Sleep hygiene is a variety of different practices that are necessary to have normal, quality night time sleep and full daytime alertness.

- Avoid clock watching and frequently checking the time during the night.
 - If you wake in the night and don't get back to sleep, get up and do something calming or boring until you feel sleepy and then return to bed.
 - Mindfulness training for stress reduction can be very helpful for ongoing insomnia.

QUESTIONS & NOTES



Important information available online

For more information and to download other fact sheets, see our website
www.leukaemia.org.nz



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