

Sleep, Sleep Beautiful Sleep

(Managing sleep in Myalgic Encephalomyelitis/CFS, FM and MCS)

Session arranged by Dr. Eleanor Stein MD FRCP(C) www.eleanorstein.com

February 9th, 2014 was a wonderful, informative afternoon on sleep from three experts in different disciplines. Calgary photographer and videographer Neil Speers (www.albertaportrait.com) videotaped the event and created three videos (one for each speaker) available at:

http://www.youtube.com/channel/UC0yR5m0nSN4_UcbVUNd7kQ



Dr. Diana Monea OD is an Optometrist graduating from University of Waterloo in 1978. She manages, owns and actively works in 3 optometric practices in 2 provinces, Saskatchewan and Alberta. She consults as an independent consultant with legal firms and the Associations of Optometrists in Canada. She has been a member of the E- team since it's origin. Dr. Monea will be talking about the impact of blue light on eye health and sleep.

<http://www.eyehhealthcentres.ca/calgary/eye-doctors/diana-monea.html>

Diana Monea is an optometrist and was primarily discussing the impact of “blue light,” which she called a new buzzword. The harms are just beginning to be understood and may be particularly problematic for children because of their developmental stage. Blue light is found in all electronic devices including our alarm clocks and smoke detectors!! All LED lights have blue light and the cooler/brighter the LED, the more blue light it contains. Blue light is a normal part of the daylight we see. It is between violet and green on the visual spectrum, so shorter than uv. Diana talked about a number of conditions: cataracts, macular degeneration and malignant melanomas that are impacted by uv and/or blue light absorption. She briefly mentioned lutein and its importance for vision.

Diana discussed how blue light affects sleep: too much, no good, too little, also no good. Blue light helps regulate our melatonin; during the day, we see more blue light and that keeps our melatonin levels low; the sun goes down at night and with less blue light our melatonin levels increase encouraging us to prepare for bed. But now that we live in the electronics age, we continue to bombard our eyes and bodies with blue light. Watching tv, playing on the computer, using hand held devices, cell phone use all mess with our melatonin levels and discourage sleep. Dr. Monea's advice is to quit using electronic devices at least one hour before going to bed (but 2 hours would be more ideal).

Dr. Montea also noted that blue light blockers are becoming more common and some have recently been developed that are clear. Blue light blockers can be built into the lens of eyeglasses when they are manufactured. Diana noted that the new lens implanted after cataract surgery have blue light and uv blockers built in. As well computer screens, tv screens and sunglasses can have these filters, or as add-ons. More awareness will mean more information is soon available about blue light and its impacts.



Dr. Jerome Alonso is a certified sleep physician having trained at the world renowned sleep clinic at Stanford University. He is the owner/operator of Canadian Sleep Institute located across from the Foothills Medical Centre. He will talk about: 1. the sleep changes he has seen in patients with ME/CFS and FM 2. when someone should consider getting a sleep study and how it may help and 3. Strategies to improve sleep.

<http://www.canadiansleepconsultants.ca>

Dr. Jerome Alonso does a lot of work with people who suffer from insomnia. He says that those suffering from sleep issues in chronic illness seem to respond well to cognitive behavior therapy for insomnia. He also briefly addressed some of the medications that can help. Here are some of his main points:

1) People too often talk themselves into sleep problems, phrases like, I'm not going to sleep anyway; I never get a good sleep and those who panic over the ever ticking clock e.g., can't sleep and there's only XX hours till I have to get up! We need to reword our talk to tell our brains to change for the better. He said that we need to practice good sleep habits -- just as many of us have actually been practicing bad ones "insomnia" by lying awake in bed.

2) Good sleep hygiene - try to get 7 1/2 - 8 hours of sleep a night; have a fixed wake up time which will help set your bedtime; wind down 2 hours before bed; get regular exercise but avoid it 2 hours before bedtime; stop smoking or avoid smoking 4 hours before bedtime; avoid caffeine 6 hours before bedtime; try not to snack or drink water 1 hour before bedtime; make your room as dark as possible and consider wearing ear plugs and eye masks to block out light and sound.

3) Sleep Consolidation - have a fixed wake up time (avoid sleeping in, this encourages desynchronized sleep is of lesser quality); set your total time in bed to no more than 30 minutes more than the amount of sleep you get per night for e.g., if you want to sleep for 8 hours do not lie awake in bed for more than 20 minutes; if after 20 minutes of lying in bed you are not asleep get up, leave the room, and do something non-stimulating to encourage going to sleep. DO NOT

go to bed until you are sleepy (being fatigued is not the same as being sleepy; sleepy is when you are doing the head bobbing can't keep my eyes open action); any napping during the day will affect your total sleep at night.



Dr. Chris Carruthers PhD, with Alberta Health Services - Knowledge Management, also offers health consulting services for those with cancer and other chronic illnesses. She has clearly seen that changing unhealthy sleep patterns can help resolve so many common symptoms you may experience. She is completely recovered from 7 years of ME/CFS, and her workbook, "Sleep Well Tonight" outlines three simple steps that can help you sleep better quickly. Dr. Carruthers will share her experience of healing, and support you in yours. <http://www.chriscarruthers.com/>

Dr. Carruthers shared her holistic approach to healing and gave a lot of hope to those attending. One thing she said that really struck home was "*When you stop fighting the illness and accept you may never get better, then you open the door to getting better.*" When you accept the illness, you start to make lifestyle changes that help with some of your symptoms, which in turn starts making you feel better. For instance, my shoulder hurts so I will put on a heating bag that will help. Or, I feel better when I don't eat (blank).

Dr. Carruthers works with many people with different types of chronic illness. She feels that poor sleep is the number one contributor to chronic illness and had a few suggestions to try to help you sleep better.

- 1) Journaling -- 2 hours before bed write for 20 minutes; this gets the stress out and bad feelings and thoughts out of your mind and onto paper and makes it more likely you won't do the "overthinking" thing when you should be sleeping.
- 2) Breathing exercise called 36 breaths. You sit in a quiet room and just breath in and out, on the out breath you count (in your head). Every time your mind starts to wander and you start to think of something other than your breathing you starting counting from one again. The idea is to get 36 breaths without being distracted by other things. This helps to train your mind to turn off when you don't want it wandering.
- 3) Body Scan. While lying in bed you start at your toes and consciously scan every part of your body and really focus on that part of the body; be conscious of pain and relaxing that body part. See if you can scan your whole body before falling asleep.

She also reinforced the "sleep hygiene" material that Dr. Alonso covered and stressed how important it is to take whatever steps can be taken to have a quiet, dark, peaceful sleep environment.

Material supplied from the Poster promoting the event, the videos and from a posting by Lone Dove on Feb. 10, 2014 at <http://www.mdjunction.com/forums/fibromyalgia-discussions/general-support/11047946-yesterdays-sleep-seminar>