



AGEING AND SLEEP

- Older people need about the same amount of sleep as younger adults.
- Age increases the risk of some sleep disorders.
- Medical conditions that arise with ageing can disrupt sleep.
- Sleeping tablets are best used only for short periods of time.
- Older people often take daytime naps as well as sleeping at night.
- Sleep/wake routines, daytime activity and sunshine all help sleep

Note: All words that are underlined relate to topics in the Sleep Health Foundation Information Library at www.sleephealthfoundation.org.au

1. How do older people sleep differently?

Most people sleep between 7 and 9 hours each day. However, they may not get all their sleep at night. Around 4 in 10 older people have at least one 30-minute nap every day. Most people over the age of 80 nap for more than one hour each day. At night, some older people take more than half an hour to get to sleep. This is the case for about 1 in 3 women and 1 in 6 men. Older people also tend to sleep lightly. They wake up more often and spend less time in deep, refreshing sleep.

2. Why does sleep change as we age?

After middle age, our body clock gradually changes (see [Body Clock](#)). As we get older, the hormones that help us sleep are released earlier in the day. Some older adults may feel sleepy earlier than they used to and they may wake up in the early hours of the morning (see [Advanced Sleep Phase Disorder](#)). [Melatonin](#) is a hormone that is produced naturally in the body at night which promotes sleep. Older people make less melatonin so they may find it difficult to get off to sleep. Other factors may interfere with sleep and cause awakenings during the night. These include hot flushes in postmenopausal women (see [Menopause and Sleep](#)) and the need to go to the toilet during the night. Pain may make it difficult to stay in one position for the whole night. Also, after retirement, many people find it convenient to take a

short nap during the day, which can reduce the need for sleep at night.

3. What sleep problems do older people have more often?

At least 1 in 4 older people have sleep apnea (see [Sleep Apnea](#)) or periodic limb movement disorder (see [Periodic Limb Movements of Sleep](#)). These problems often disturb the sleep of the bed partner as well. [Insomnia](#) is seen in 4 in 10 older people. One in 10 older people has insomnia that is a problem for more than 3 months. Long and/or frequent time awake during the night may happen if people spend too long in bed each night.

4. What medical conditions can interfere with sleep?

Many conditions can make it harder to sleep. Some that are common in older people are arthritis, osteoporosis, Parkinson's, incontinence (see [Nocturia](#)), indigestion, heart disease and lung diseases such as asthma or COPD. The drugs used to treat these conditions may also interfere with sleep. [Anxiety](#) and [depression](#) can both interfere with getting off to sleep as well as cause wakefulness during the night. Dementia or Alzheimer's disease can make sleep worse (see [Dementia and Sleep](#)). Two-thirds of nursing home residents have problems with their sleep. Sleep problems tend to increase when there is not enough exercise or interesting activities during the day or people go to bed too early.



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5. What can I do to improve my sleep?

There are many simple things that can be done to improve sleep. The most important is to keep regular sleep hours. Try to go to bed at about the same time every night and get out of bed about the same time every morning. An alarm clock can help with this. Avoid sleeping in, even if you have had a poor night's sleep and still feel tired. Don't go to bed too early and aim to only spend the time in bed that you actually need for sleep (e.g. 8 hours). If you happen to wake early, think about getting out of bed and starting your day. Regular sleep habits strengthen your **Body Clock's** sleep-wake rhythm. Exposure to sunlight during the morning and late afternoon also help your body clock. Exercise during the day will help you to feel sleepier at night. See [Good Sleep Habits](#). Take care with naps. An afternoon nap may help your energy levels but may also interfere with sleeping at night. Naps can be a problem if they are late in the afternoon or last longer than 15-20 minutes. The best approach is to experiment to find what works best. It is important to remember that sleep needs and sleep patterns change with age and different circumstances.

6. Where and when should you seek help?

Talk to your local doctor if you have persistent problems with your sleep such that it affects your daytime wellbeing (see [Insomnia](#)) or you are always feeling sleepy during the day (see [Excessive Daytime Sleepiness](#)). Neither of these is a normal result of ageing. Something can be done about both of them. You should also seek help if your partner notices something wrong with your breathing during sleep. There are effective treatments for [snoring](#), [sleep apnea](#) and [insomnia](#).

7. How are sleep disorders treated?

Treatment for a sleep problem depends on the cause, so the issue has to be diagnosed before treatment commences. Talking to a doctor about sleeping problems is important. You might need a referral to see a [sleep specialist](#). There are a variety of effective treatments for [snoring](#), [sleep apnoea](#), [restless legs](#), [insomnia](#) and other common sleep problems. If you have insomnia, your doctor might recommend that you see a psychologist who specialises in Cognitive Behaviour Therapy for insomnia (CBT-i). Alternatively, your doctor may prescribe [melatonin](#) (a synthetic version of the hormone naturally produced by your body and sold as Circadin). [Sleeping tablets](#), on the other hand, are effective for just a short time, and should not be used for longer than four weeks. You may find it difficult to stop taking them, and they may also make you drowsy the following day. Sleeping tablets also increase the risk of falls in some older people.

8. Can anything else cause sleep symptoms?

Poor sleep may not simply be related to getting older. Stress, [depression](#), [anxiety](#), medications, pain and many other factors may all contribute. Remember that good sleep is vital for good health, and any concerns you have are best raised with your doctor.

Further information

www.sleepfoundation.org/articles/aging-and-sleep

For information on over 70 different sleep related topics, written by professionals, visit the Sleep Health Foundation Information Library at www.sleephealthfoundation.org.au. The underlined topics in this article are covered in detail there.



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