



YOUNG-D

Better sleep for people with young onset dementia

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Contents

- Lecture.....3
 - Introduction3
 - Sleep: role and functions.....3
 - How much do we (preferably) sleep?.....4
 - Healthy sleep habits/behaviour or sleep hygiene.....5
 - How can poor sleep be treated?6
- Workshop.....8
 - Discussing sleep habits8
 - Insight in sleep hygiene.....9
 - Sharing experiences on sleep..... 12
 - Breathing exercise before bed time..... 13
- References 14

Better sleep for people with young onset dementia

Lecture

Introduction

Although there is limited evidence on sleep problems and insomnia among people with YOD, existing literature suggests that cognitive decline and LOD have a negative impact on sleep (Cipriani et al., 2015). Promising interventions for preventing and managing sleep problems in people with and without dementia include CBT-i, sleep hygiene and ACT (Chung et al., 2018; Geiger-Brown et al. 2015; Jin et al., 2021; Koffel et al., 2014; Salari et al., 2020,). In addition, regular performance of breathing exercises can also improve sleep (Jerath et al., 2018).

Sleep: role and functions

Sleep is an essential function that allows your body and mind to recharge, leaving you refreshed and alert when you wake up. Healthy sleep also helps the body remain healthy.

Good sleep provides rest and recovery, supports physical and mental health and facilitates the hormonal and immune system. Furthermore, good sleep aids cognitive functions such as the ability to concentrate, think clearly, and process memories.

A good qualitative sleep contributes to several bodily functions such as:

- Recovery and energy
- Cognitive functions
- Both physical and mental health
- Hormonal balance and immunity

How much do we (preferably) sleep?

- Between the ages of 18 and 64 years: 7-9 hours per night
- 65 years and older: 7-8 hours per night

(Sleepfoundation.org)

Our sleep is composed out of several **sleep cycles**. During each cycle you go through different **sleep stages**: the NREM sleep with light sleep (N1, N2) and deep sleep (N3) followed by REM (dream)sleep.

The composition of each cycle, how much time is spent in each sleep stage, changes as the night proceeds.

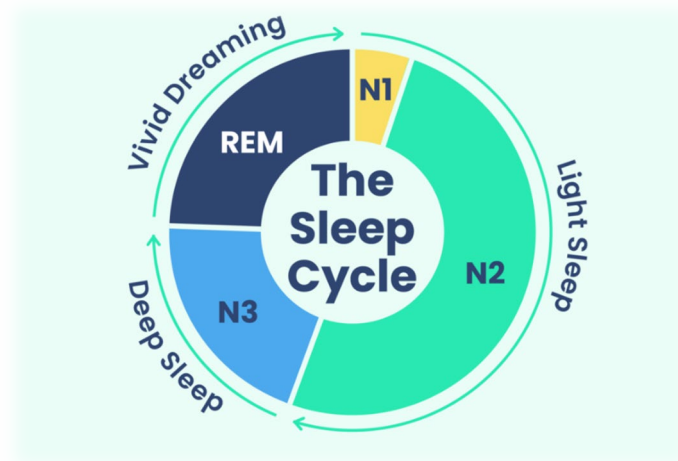


Figure by Sleep foundation (<https://www.sleepfoundation.org/stages-of-sleep>)

Healthy sleep habits/behaviour or sleep hygiene

- Stick to regular bedtimes
- Wind down from a busy day
- Take the time to relax before bedtime
- No alcohol before bed
- No caffeine after 3 PM
- No daytime napping longer than 30 min or later than 3 PM
- Don't exercise too intensively before bed time
- Taking a bath or warm shower can help you relax before bed time (avoid hot temperatures)
- Practicing a breathing exercise before bed time can help you find sleep more easily
- Stop smoking or don't smoke before bedtime
- Don't eat too heavy before bedtime
- Keep negative thoughts out of the bedroom: time for renumeration is preferred during the day
- Keep your bedroom for sleep only
- Keep your bedroom tidy, dark and cool



More information on healthy sleep behaviour and healthy sleep hygiene can be consulted from:

- <https://www.sleepfoundation.org/sleep-hygiene>
- <https://www.thensf.org/sleep-tips/>

How can poor sleep be treated?

- **Cognitive behavioural Therapy for insomnia (CBT-i)** is a widely used evidence-based treatment for insomnia. The basic components of CBT-I include: 1) sleep restriction, which involves limiting time in bed to consolidate sleep and increase the sleep drive; 2) stimulus control, which involves restricting the behaviors that occur in the bedroom to promote a strong association between sleep and sleep related stimuli; and 3) cognitive restructuring, which addresses maladaptive thoughts and beliefs about sleep in order to decrease sleep-related anxiety. The use of CBT-i has already been shown effective in improving sleep onset latency, sleep efficiency and wake after sleep onset
- **Sleep hygiene (or Healthy sleep behaviour/habbits)** is an important addition to CBT-i. Sleep hygiene consists out of general knowledge about sleep (or healthy sleep behaviour) such as nutrition and substance use, regular exercise and bedroom arrangement, sleep-wake regularity and avoidance of daytime naps as well as stress management
- **Relaxation techniques** such as breathing exercises, mindfulness (e.g. bodyscan) and muscle relaxation (e.g. progressive muscle relaxation), visualization or guided imagery,....
- **Acceptance and Commitment Therapy (ACT)** is a more evolved version of CBT and also shown useful in treatment of insomnia. ACT is known as a psychological intervention based on modern behavioral psychology in which individuals change their relationships with physical thoughts and feelings such as their sleep. Although there are several parallels between CBT-I and ACT, ACT includes six treatment processes (Hexaflex): Acceptance, Cognitive defusion, Being in the present moment, Self as context, Values, and Committed action



Although evidence on sleep problems and insomnia is scarce among people with Young Onset Dementia it can be concluded that cognitive decline and late onset dementia have a negative effect on sleep.

Sleep problems such as sundowning, disrupted sleep and daytime sleepiness often occur in dementia. Furthermore, people with dementia tend to report a higher number of experienced nightmares.

Being aware of good quality sleep and gaining insight in healthy sleep habits (sleep hygiene) can contribute to the prevention and management of sleep problems in people with Young Onset Dementia.

Workshop

Discussing sleep habits

- **Description:** discussion of sleep habits.
- **Goal:** It is important for trainers to keep in mind that the goal of this session is not to tackle any sleep problems, but more to create a forum to discuss used sleep habits among participants
- **Method:** Use a group discussion (peer-to-peer) or an individual dialogue. Alternatively, consider using a taking jar or group discussion to facilitate the group discussion
 - Examples of questions for the group discussion on sleep:
 - *What is sleep? (restful stage)*
 - *How much sleep does an adult need? (7-9 hours)*
 - *How is your sleep currently?*
 - *How much sleep do you get during the night?*
 - *Do you sleep during the day?*
 - *What helps you sleep?*
 - *What interferes/challenges your sleep?*
 - *Do you sleep throughout the day?*
- **Tools:** Jar with questions on sleep habits



Insight in sleep hygiene

- **Description:** pictures about sleep habits/behaviours are being shown to initiate expression of the participants by means of reflective questions (goal: insight in sleep hygiene)
- **Goal:** to gain insight into sleep hygiene/healthy sleep habits (see figure 1). It is important for the trainer to be prepared and read through background information on healthy sleep habits/sleep hygiene prior to the start of the session.
 - <https://www.thensf.org/>
 - <https://sleepeducation.org/healthy-sleep/healthy-sleep-habits/>
 - <https://www.sleepfoundation.org/sleep-hygiene>
- **Method:** all participants are shown a picture or participants get to choose a picture. On the backside of the picture, a reflective question/statement about good/poor sleep behaviour/habits can be written. The participants can reflect on their answer. After answering the questions, more information about these sleep behaviours/habits can be discussed.

Participants are shown pictures related to sleep and are asked reflective questions to elicit their responses.

 - Examples of pictures and reflective questions (see figure 2)
 - a bed: *what makes a good bed/bed room?*
 - a cup of coffee: *before going to bed, what do you usually eat/drink?*
 - a person who is relaxing: *how do you unwind after a busy day? What helps you relax?*
 - a clock: *what time do you usually go to bed and wake up?*
- **Tools:** pictures and questions/statements about sleep

8 TIPS TO IMPROVE YOUR SLEEP HYGIENE



SET A SCHEDULE

Maintain a consistent sleep-wake cycle



CREATE A PRE-SLEEP ROUTINE

Wind down with calming activities before bed



LIMIT DAYTIME NAPPING

No longer than 30 minutes



LIMIT SCREEN TIME

Reduce exposure to screens, especially before bedtime



OPTIMIZE BEDROOM

Make your bedroom dark, quiet, and cool



WATCH YOUR DIET

Avoid heavy meals, caffeine, and nicotine close to bedtime



STAY ACTIVE

Regular exercise can improve sleep, but avoid vigorous activity close to bedtime



MANAGE STRESS

Practice breathing exercises to ease your mind before sleep

Figure 1: Infographic on healthy sleep habits/sleep hygiene



Figure 2: pictures to help discuss good sleep habits/sleep hygiene

Sharing experiences on sleep



- **Description:** a discussion (in group) or conversation/dialogue (in a one-on-one context) on sleep habits can help people with Young Onset Dementia to open up about experiences they have faced/are facing about their sleep
- **Goal:** to talk about experiences, fears regarding (future) sleep and (dis)beliefs about (not) sleeping well
- **Method:** the participants are asked a few questions regarding sleep. There is no right or wrong answer. The goal is merely to reflect on own situations and to listen to other participants.
- **Tools:** questions this exercise can be found in the toolbox of the manual

Breathing exercise before bed time



- **Description:** a breathing exercise
- **Goal:** the goal is to teach participants how to focus on their breathing and to have participants experience the relaxation response while performing the exercise
- **Method:** participants are advised to perform these breathing exercises before bedtime (relaxation) and when they are lying awake at night
- **Tools:** more examples of breathing exercises can be found in the trainers' manual 'Breathing exercises' of this e-learning and in the manual

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