Dr. Gerard Muraida

The Doc Is In

Gerard Muraida MD is a Geriatrician and the Medical Director at InnovAge in Albuquerque.

Primary and secondary insomnia are two common types of sleep disorders that affect the senior population. Insomnia refers to difficulty falling asleep, staying asleep, or experiencing non-restorative sleep. In older people, insomnia can have significant implications for overall health and quality of life.

Primary insomnia is characterized by sleep difficulties that are not directly attributable to any other medical condition or to substance use. It is often considered a standalone sleep disorder. Among seniors, primary insomnia may be influenced by several factors:

• Age: As individuals get older, they may experience changes in their sleep architecture, such as decreased total sleep time, increased

Difficulty Sleeping? Insomnia Causes Vary

nighttime awakenings, and lighter sleep. These natural changes can contribute to the development of primary insomnia.

• Psychological factors: Anxiety, depression, and other psychological factors can disrupt sleep patterns that can lead to primary insomnia. Seniors may be particularly vulnerable to these due to life transitions, chronic health conditions, and/or social isolation.

• Lifestyle: Poor sleep hygiene practices, such as irregular sleep schedules, excessive daytime napping, or consuming stimulants like caffeine or nicotine close to bedtime can contribute to primary insomnia.

Secondary insomnia is caused by underlying medical, psychiatric, or environmental factors. In seniors, secondary insomnia is often associated with comorbid conditions and medication use. Some common causes of secondary insomnia include:

• Medical conditions such as chronic pain, respiratory disorders (sleep apnea), neurodegenerative diseases (such as Parkinson's), cardiovascular conditions, gastrointestinal issues, and urinary problems can disrupt sleep and cause secondary insomnia.

• Medications: Seniors frequently take multiple medications for various medical conditions. Certain drugs can disrupt sleep. These include diuretics ("water pills"), antidepressants, and medications for hypertension.

• Psychiatric disorders such as anxiety, depression, and cognitive impairments are common in the older population and can contribute to secondary insomnia.

• Environmental factors: Noise, room temperature, lighting, pets, and uncomfortable sleep environments can disturb sleep.

It is essential that your primary care provider be given as much information about your sleep situation to assess what type of sleep disturbance may be present. In many cases, non-pharmacological interventions, such as sleep hygiene education, cognitive-behavioral therapy, relaxation techniques, and environmental modifications



can help promote restful sleep. In more severe cases, pharmacological interventions may be necessary and need to be monitored for possible side effects and interactions. Addressing the underlying causes, whether they are medical, psychiatric, and/or environmental may greatly improve one's chances for restorative sleep.

A multidimensional approach is often required to treat insomnia in seniors. If sleep is poor or you wake up not feeling rested after a full night's sleep, ask your provider to assess for primary or secondary insomnia.



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