

WAKING UP TO THE IMPORTANCE OF SLEEP



Not getting enough sleep? You're not alone. The value we place on quality sleep at night seems to be diminishing and we are sacrificing hours of sleep every day.

"Sleep curtailment" has become commonplace in modern society, and the prevalence of sleep disorders is also increasing. Failing to get a good night's sleep is often seen as harmless and even efficient. However, emerging evidence tells us that this couldn't be farther from the truth.

Sleep plays an important role in regulating hormones, blood glucose and cardiovascular function. It is associated with decreased heart rate and blood pressure. In fact, research suggests that sleep loss may play a role in the increasing prevalence of type 2 diabetes and obesity; the trend toward shorter sleep duration over the last 50 years coincides with dramatic increases in the prevalence of these two conditions.

"This connection between sleep and medical disorders fascinates me," says Dr. Sharon Chung, PhD, a staff scientist at the Sleep Research Laboratory at Toronto Western Hospital, University Health Network and Youthdale Treatment Centres. "The literature suggests that if you have poor sleep you're at increased risk of many chronic disorders, including type 2 diabetes."



Dr. Sharon Chung investigates the connections between poor sleep and chronic diseases such as diabetes.

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Dr. Chung is involved in a number of research projects involving sleep. Her investigations have included such areas as shift work, bright light therapy, sleep apnea and hypertension, depression and physician's knowledge of and screening for sleep disorders.

"There are a number of connections between poor sleep and chronic diseases such as diabetes," she says. "For example, short sleep, disturbed sleep or sleep disorders can lead to hormonal and energy imbalances. These imbalances can lead to insulin resistance, glucose intolerance, decreased energy (and, therefore, reduced desire to exercise), weight gain and upward regulation of appetite (particularly toward high-carbohydrate foods). Clearly, these are significant problems for those with diabetes and those at risk."

Research suggests that sleep loss may play a role in the increasing prevalence of type 2 diabetes and obesity.

People with type 2 diabetes are at increased risk for a number of specific sleep problems, including poor sleep, restless legs syndrome and obstructive sleep apnea (when you stop breathing for short periods—at least 10 seconds—many times during sleep).

Poor sleep can be caused or made worse by the symptoms of diabetes, including the need to urinate frequently at night and painful diabetic neuropathy, both of which can interrupt sleep and make falling asleep more difficult. Restless legs syndrome (associated with diabetic neuropathy), an uncomfortable throbbing, pins-and-needles feeling, is relieved by getting up and walking around—another interruption to sleep. And sleep apnea generally occurs without one’s knowledge.



Electrodes monitor all phases of sleep in research subjects.

Although often undetected, sleep apnea is very common among people living with type 2 diabetes, affecting about one in four. Since it is also associated with high blood pressure and other cardiovascular problems, undiagnosed and untreated sleep apnea is potentially very dangerous. As most people aren’t aware that they have sleep apnea, it’s important that anyone with type 2 diabetes who feels very sleepy or fatigued (two common symptoms of untreated sleep apnea) talk to their doctor.

For people with or at risk for type 2 diabetes, improved sleep is a clear pathway to improved health.

“Generally, you know something is wrong when you get up in the morning feeling as though you never slept. If you are fighting not to fall asleep when driving, reading a book or doing other sedentary activities, and if you have a total lack of energy and feel washed out, make a special point to discuss these issues with your physician,” says Dr. Chung. “They will refer you to a specialist or a sleep clinic. A proper sleep study in a clinic is the only way to diagnose sleeping disorders and get you the treatment you need.”

According to Dr. Chung’s research, many physicians are unfortunately under-informed about the health and social impacts of sleep apnea. So, if you don’t feel your doctor is doing enough to help you, don’t hesitate to consult a second doctor.

Research also shows very clearly that people with sleep disorders seek much more in the way of medical care overall, notes Dr. Chung. “In a general sense, people who have a significant medical condition and are sleep deprived are less able to cope with that condition. A Canadian study has shown that these individuals utilize significantly more healthcare resources before getting treatment. Therefore, obtaining medical management of sleep disorders actually results in savings to the healthcare system in general.”

Based on research conducted by Dr. Chung and colleagues, there is a simple test —**STOP-BANG**—for sleep apnea that you or your doctor can do.

Answer YES or NO to the following:

- Snore most nights
- often **T**ired
- bed partner **O**bserves you stop breathing during sleep
- high blood **P**ressure
- overweight – **B**MI >35 kg/m²
- **A**ge >50 years
- **N**eck size >40 cm
- and male **G**ender?

If you answer YES to three or more, then you are at greater risk of having sleep apnea.

For more information on sleep and sleep disorders, visit www.sleepontario.com. For sleep clinics in Ontario and across the country, visit the Canadian Sleep Society at www.css.to.

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