Sleep Problems in Parkinson’s Disease: Essential Facts for Patients

What types of sleep problems do patients with Parkinson’s disease (PD) have?

In addition to motor symptoms that affect their movement, PD patients usually have non-motor symptoms. Trouble sleeping can be one of those symptoms. Sleep problems are common in early PD and as the disease advances. Some sleep problems can even start years before the PD patient has motor symptoms. PD patients might have one or more of the following sleep problems:

• Trouble falling or staying asleep (insomnia), usually more trouble staying asleep.
• Yelling, screaming, or acting out dreams, including punching or hitting. This is known as REM sleep behavior disorder (RBD).
• Excessive daytime sleepiness, and sometimes falling asleep suddenly without meaning to (sleep attacks).
• Having to get up more often to use the bathroom.
• An uncomfortable feeling in the legs when lying down that is relieved with movement. This is called “restless legs syndrome.” Restless leg syndrome often comes with jerking leg movements during sleep (periodic leg movement disorder).
• Interrupted breathing during sleep (sleep apnea).

Why do sleep problems happen? Do sleep problems relate to medication?

PD can cause changes in the chemical substances (called neurotransmitters) and brain areas that control sleeping and waking. Those changes cause sleeping problems in PD patients. Medications taken to treat PD may also cause sleep symptoms or make them worse. This is often the case with daytime sleepiness and/or vivid dreams.

How are sleep problems diagnosed?

PD patients should talk to their health care providers about any sleep problems. Their doctor may use a series of questions for the patient and bedpartner (if they have one) to help measure the severity of the sleep problems. They will also look at the patient’s medication to see if it might be affecting their sleep. A sleep study may be needed to accurately diagnose the sleep problem. Sleep studies may be overnight, called polysomnography. Or, the provider may conduct a study that monitors movement 24 hours a day. That type of study is called actigraphy.

How can PD patients sleep better?

PD patients and their caregivers may try these tips for a better night’s sleep.

• Develop good sleep habits: Establish a regular bedtime routine. For example, going to bed and waking up at the same time each day, and doing relaxing things like reading a book at night.
• Avoid getting into bed until it is time to go to sleep.
• Avoid things that may disturb sleep before bedtime such as caffeine, alcohol, and frequent drinking at night (to avoid going to bathroom too often).
• Create a comfortable sleeping environment. This may include a comfortable bed, appropriate light and room temperature.
• Perform regular physical activity and exercise during the day.
• If acting out dreams is an issue, put pillows around the bed and into bed to avoid injury.
• Try to avoid late afternoon or early evening naps.
• Consider relaxation therapy, music or light therapy.
• Avoid lying awake in bed for extended periods. If unable to sleep for more than half an hour or so, get out of bed and do something relaxing. Then try to sleep again later.

Are there treatment options for sleep problems?

There are several possible treatments for PD patients with sleep problems.

• Medications used to treat PD can affect sleep. If motor symptoms are a problem at night, a medication adjustment may help.
• Depression, anxiety, and pain can make sleep problems worse. Twisting and limb cramping caused by dystonia may also add to sleep problems. Treating those conditions or symptoms may help to resolve sleep problems.
• If the PD patient is acting out dreams, medication may help. Drugs such as melatonin or clonazepam may be prescribed.
• Cognitive behavioral therapy (CBT) is sometimes used for sleep problems. PD patients may find CBT helpful.
• Insomnia medications may be helpful for PD patients with sleep problems, although they are not the first treatment choice. Note that insomnia medications are often different for PD patients.
• In case of breathing difficulties during sleep (apnea), it is important to have this evaluated. A sleep aid device might be helpful.
• Some PD patients have a problem with daytime sleepiness. If that is the case, staying active during the day is important. Doctors may consider medication for this problem.