





Insomnia in Survivorship

Having difficulty falling asleep or staying asleep after cancer treatment is complete is one of the most common symptoms that cancer survivors experience, affecting up to 60% of patients receiving active treatment as well as cancer survivors. People often describe waking up too early in the morning and not being able to fall back to sleep. Because of this, people with insomnia often sleep less or report poor sleep quality even with allocating enough time for sleep. Poor sleep quality makes it more difficult to do your day to day tasks during the day.

Symptoms of Insomnia include:

- Difficulty falling asleep and/or staying asleep
- Variable sleep, such as a few nights of poor sleep followed by a night of better sleep
- Feeling tired or sleepy during the day
- Poor memory or forgetfulness
- Difficulty with concentration/focus
- Irritability or distress
- Decreased energy or motivation
- Making errors or having accidents more than usual
- Ongoing worry about sleep

Many people with insomnia also struggle with depression and/or anxiety. Insomnia can also affect your personal relationships, job performance, and day-to-day functioning.

The reasons for insomnia are different for people who have completed cancer therapy (i.e. chemotherapy, immunotherapy, radiation, or surgery) compared to people who are actively undergoing treatment. While people are actively receiving cancer treatment, insomnia may be caused by cancer therapy (i.e. corticosteroids), anxiety related to the cancer diagnosis or therapy, or other issues like pain, lack of exercise or depression. However, people may continue to experience insomnia after treatment is completed due to fear of recurrence, poor sleep hygiene, financial stresses, or other social stressors.

How are the symptoms of insomnia managed?

It is important for your medical provider to ask about your symptoms, medicines, and daily activities. While tests to measure your sleep are not required to diagnose insomnia, your provider may recommend tests to assess for other sleep disorders, such as obstructive sleep apnea. Some tests that they may order is polysomnography, actigraphy, or home sleep apnea testing.

Treatment of Insomnia include:

• Cognitive behavioral therapy for insomnia (CBT-I) is recommended as the initial treatment for chronic insomnia (lasting for 3 months or more).

- o CBT-I is provided by a trained clinician over the course of several weeks to identify and address factors that contribute to insomnia and correct habits that are harmful to sleep.
- o CBT-I is comprised of sleep education, sleep restriction or compression, stimulus control, sleep hygiene, cognitive therapy, and relaxation exercises.
- Please ask your medical provider for a referral to a trained psychotherapist that specializes in providing CBT-I.
- Over-the-counter sleep aids include melatonin and antihistamines
- Talk to your medical provider about the following medicines indicated for insomnia:
 - o Benzodiazepine receptor agonists (i.e. benzodiazepines such as quazepam, triazolam, estazolam, temazepam, and flurazepam; nonbenzodiazepines such as zaleplon, eszopiclone, or zolpidem)
 - O Dual orexin receptor antagonists (i.e. lemborexant, suvorexant, or daridorexant)
 - o Histamine receptor antagonists (i.e. low-dose doxepin)
 - o Melatonin receptor agonists (i.e. ramelteon)

What can I do to combat insomnia?

- Stimulus control:
 - o Go to bed only when you feel sleepy.
 - o Use your bed and bedroom only for sleep and sex.
 - o If you struggle with sleep, get up and go to another room to do a relaxing activity until you feel sleepy again.
- Sleep hygiene:
 - Set a regular sleep schedule (the same bedtime and wake time every day). Avoid naps during the day.
 - Avoid caffeine after lunch time.
 - Avoid alcohol near bedtime.
 - o Do not smoke or use nicotine-containing products (especially during the evening and at night)
 - Exercise regularly during the day time and avoid exercise two hours before bedtime. Exercise is one of the most effective ways to combat insomnia cancer survivors should aim to do at least 150 minutes of moderate physical activity or 75 minutes of vigorous physical activity per week. Aerobic or strength-building exercise is helpful to improve symptoms of insomnia.
 - o Keep your room quiet and dark. You can use a fan or white noise machine to help reduce noise.
 - Avoid checking the time during the night. Avoid looking at your phone or TV. Avoid having a clock in the bedroom.

• Relaxation Exercises

- O Diaphragmatic breathing breathe slowly through your nose using only your diaphragm and start counting your breaths for a total of 10 breaths counting forward from 10 to 1 and another 10 breaths counting backward from 10 to 1.
- o Doing gentle yoga with breathing exercises may help people have better quality sleep at night.
- o Progressive muscle relaxation Progressively relax your muscles from head to your feet by squeezing your muscles gently for 1 to 2 seconds then relaxing as you go down the muscle groups of your body.
- Consider joining a support group for people with cancer. Talking about your fatigue with people who share the same difficulty can help you learn new ways to cope.

• Stay connected. Keep in touch with friends and family and consider joining a support group for cancer survivors.

These are only some suggestions for coping with insomnia which is a common symptom among cancer survivors. However, if you are having a difficult time managing, please speak with your health care provider.

When Should You Call Your Healthcare Team?

If you experience any of the following, call your healthcare team:

- Are so tired that you cannot do you daily activities like bathing, getting dressed, or eating
- Have thoughts of hurting yourself or others