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Sleep Problems

Many people with cancer have trouble sleeping. Sleep problems can affect you in different ways. Any change in your usual sleeping habits can make it harder to do everyday activities. There are treatments available and steps you can take to help manage your cancer-related sleep problems.

- Types of sleep problems in people with cancer
- What causes sleep problems?
- Treating sleep problems
- Tips for managing sleep problems
- When to ask for help

Getting at least seven hours of sleep each night is advised for most adults. But many things can affect your sleep, including your age, stage in life, home and work life, stress level, and other non-cancer related problems.

For some people, sleep problems are short-term, lasting less than 3 months. But for other people, these problems might last several months or years. Sleep problems can also come and go based on your emotions and the side effects of your treatment.

If you have sleep problems, you might notice you have less energy than usual. Sleep problems can also affect what you are able to do at home, work, or school. It might make it harder to enjoy social activities, friends, family, or hobbies.

Types of sleep problems in people with cancer

There are a few different types of sleep problems you might have.

Insomnia

Having trouble falling asleep or staying asleep is called **insomnia**.

Insomnia can be **short-term** (lasting for a single night, a few days, or a few weeks), or it can be **chronic** (lasting for three months or longer).

People with insomnia don't get as much sleep as they need. This can lead to fatigue (a physical, emotional, and mental feeling of tiredness). It can also lead to feeling sleepy during the day or having trouble doing your usual daily activities.

If you have cancer and insomnia, you might:

- Have trouble falling asleep
- Wake up during the night and have trouble going back to sleep

If you had insomnia before you were diagnosed with cancer, you are more likely to continue having trouble sleeping after your cancer diagnosis. If this is true for you, then you might need to try some new ways of managing your sleep problems.

Hypersomnia

People with **hypersomnia** feel very sleepy during the day or want to sleep for longer than normal at night. Signs of hypersomnia include:

- Sleeping for 10 or more hours at a time (or more than 12 hours for children)
- Longer periods of deep sleep than usual
- Trouble staying awake during the day
- Sleepiness that doesn't get better after sleeping or taking a nap

Hypersomnia can make it hard to take care of your family, home, and work responsibilities. Because you are so sleepy, you may find it difficult to enjoy activities.

Hypersomnia and <u>fatigue</u>¹ are similar, but they are not the same. Hypersomnia is feeling too sleepy during the day and includes sleeping for a long time at night. Fatigue is a lack of energy and exhaustion that does not get better after you sleep.

For some people, sleep problems can make cancer-related fatigue worse. Cancer-related fatigue can also make sleep problems worse, because you might want to nap during the day. Daytime naps often make it harder to sleep at night.

Restless legs syndrome

Restless legs syndrome (RLS) makes you feel like you have to move your legs when you're trying to rest or sleep. Your legs may also feel itchy or irritated, often causing jerking movements that keep you awake. RLS usually happens more during the evening hours.

RLS can happen to people who don't have cancer, but some people get it during chemotherapy.

Sleep apnea

Sleep apnea is short pauses in your breathing while you are asleep. Each pause can last as long as ten seconds and can happen many times in one night. Many people with

Sometimes the place where you sleep also makes a difference. You might have trouble sleeping if the room is too hot, cold, or noisy.

Other times, sleep disruptions can't be controlled as easily, such as if you need to use the bathroom often, have nightmares or sleep terrors, or sleepwalk.

Symptoms of sleep problems

People with cancer and sleep problems report:

- Feeling more tired than usual during the day
- Feeling the need to rest and sleep more (fatigue)
- Having trouble getting to sleep or staying asleep (insomnia)
- Getting too much sleep but still feeling tired (hypersomnia)
- No being able to function as well during the daytime
- Feeling distressed about their sleep problems
- Having a poor quality of life

Treating sleep problems

Sleep problems can be very different for each person. Start by describing your symptoms to your health care team. This helps them figure out the best way to treat your problem.

Your health care team might suggest that you meet with a sleep specialist. A sleep specialist may be able to help you figure out why you're having trouble sleeping. Ask your health care team about a referral, if needed.

Below are some common ways to treat cancer-related sleep problems. You might need to use more than one way to help with your sleep.

Cognitive behavioral therapy (CBT)

Thinking or worrying about sleeping can make your sleep problems worse. **Cognitive behavioral therapy (CBT)** is one way to help you feel less anxious about sleep. The goal of CBT is to recognize your sleep habits and patterns and then find ways to manage them.

Relaxation

There are many ways to relax, calm your thinking, and wind down before bed. Relaxation methods can help you fall asleep, stay asleep, and go back to sleep if you wake up during the night.

Some examples of relaxation methods are:

- Focused breathing
- Meditation
- Mindfulness
- Progressive muscle relaxation
- Music therapy
- Hypnosis
- Guided imagery

You might be able to learn these methods on your own. But if you'd like help, ask your cancer care team for resources or a referral to a sleep specialist.

Learn more about mindfulness and other relaxation methods³.

Managing medicines

Sometimes, medicine is used to manage sleep problems. Your health care team can help you decide if this is right for you.

Other types of medicine can cause sleep problems. This includes steroids and hormones, and some medicines for pain, seizures, anxiety, and depression.

Don't make any changes to your medicines without first talking to your health care team. Tell them about any medicines you are taking.

Treating side effects

The side effects of your cancer or cancer treatment might cause sleep problems. Many of these side effects can be managed, and this might help you sleep.

You might sleep better if these cancer-related side effects are well managed:

- Pain
- Depression
- Anxiety

- Peripheral neuropathy
- Nausea and vomiting
- · Hot flashes and sweating

Learn more about treating <u>cancer-related side effects</u>⁴.

Sleep apnea

Cancer and cancer treatment are not usually the cause of sleep apnea, but many people with cancer have sleep apnea for other reasons. This needs to be treated to prevent other problems.

A **continuous positive airway pressure device (CPAP)** is the usual treatment for sleep apnea. A CPAP helps you breathe while you sleep. Tell your cancer care team if you have, or think you might have, sleep apnea.

Stay in a darkened room and do something relaxing, like reading a book. Don't go back to bed until you feel sleepy again.

Eating and drinking

What you eat and drink before bed can also affect your sleep.

- Avoid big evening meals. Try not to eat a big meal or drink a lot of liquid before bed.
- Stick to light snacks. If you need to eat before bed, have a light snack with some protein, like cheese or peanut butter.
- Try a warm drink. Warm, caffeine-free drinks like heated milk or decaf tea might help you relax.

Sleep location

It can also help if you set up your room for a good night's sleep.

- Manage lights, noise, and temperature. If possible, keep your room dark, quiet, and at a comfortable temperature.
- Wear comfortable clothes. Loose, comfortable clothing can sometimes help you sleep.
- Think about your bedding. Keep your bedding clean. Use pillows and blankets to make yourself as comfortable as possible.
- Only use your bed for sleeping and sex.

Daytime routine

What you do during the day can make a big difference in how you sleep at night.

- **Get sunlight in the morning.** Try to spend time in bright daylight early in the morning.
- Avoid caffeine after mid-afternoon. You can also try cutting back on caffeine or not drinking it at all.
- Avoid tobacco, nicotine, and alcohol. Avoid tobacco, nicotine products, and alcohol too close to bedtime. Or avoid them completely.
- Set your "to do" list aside. If worry or anxiety makes it hard for you to sleep, try

writing a "to do" list before bed.

- Schedule a "worry time." Set aside "worry time" earlier in the day.
- Avoid daytime naps. If you need to nap, keep it to 30 minutes or less. Try to only nap once per day.
- Get physical activity every day. It's best to do this in the morning or afternoon.
- Avoid exercise close to bedtime. Try not to exercise within 3 hours of bedtime.
- **Stretch daily.** If you have restless leg syndrome, daily stretching exercises might relax your muscles.

If you need help figuring out what physical activity or stretches to do, talk to your cancer care team. They might be able to help you find an exercise routine. Or they can refer you to a physical therapist to learn stretches that relax your muscles.

Tracking your sleep

Sometimes it helps to keep track of your sleep habits so you can figure out patterns and problems.

- Keep a sleep diary. Record the times you sleep and wake up, including naps.
- Write down what works and doesn't work. Write down anything that keeps you from falling or staying asleep (like side effects or worries). Also record anything that helps you sleep better.
- Ask your partner for clues. If you have a partner, ask them if they notice anything unusual when you are asleep.
- **Review your medicines.** Review all your medicines with your health care team. This includes prescriptions, over-the-counter medicines, supplements, or herbals. Some of these can affect your sleep.

When to ask for help

Call your health care team if you:

- Sleep very little or can't sleep at all during the night
- Have trouble staying awake during the day
- Think you might have sleep apnea or restless leg syndrome

Cancer Survivors Network

An online community where people with cancer, survivors, and caregivers can connect with others 24/7.

Cancer Help 5

Contact the ACS cancer helpline to get answers and information

MHA - Mental Health America

Find a counselor or mental health provider.

Hyperlinks

- 1. <u>www.cancer.org/cancer/managing-cancer/side-effects/fatigue-weakness-sleep.html</u>
- 2. www.cancer.org/cancer/managing-cancer/side-effects.html
- 3. <u>www.cancer.org/cancer/survivorship/coping/practice-mindfulness-and-relaxation.html</u>
- 4. www.cancer.org/cancer/managing-cancer/side-effects.html
- 5. www.cancer.org/about-us/what-we-do/providing-support.html

References

American Society of Clinical Oncology. Sleeping Problems: Hypersomnia, Somnolence Syndrome, and Nightmares. Accessed on cancer.net. Content is no longer available.

American Society of Clinical Oncology. Sleeping Problems: Insomnia. Accessed at cancer.net. Content is no longer available.

Büttner-Teleag A, Kim YT, Osel T, Richter K. Sleep Disorders in Cancer-A Systematic Review. Int J Environ Res Public Health. 2021;18(21):11696. Published 2021 Nov 7.

National Comprehensive Cancer Network (NCCN). Palliative care. Version 1.2024. Accessed at https://www.nccn.org/ on April 12, 2024.

National Comprehensive Cancer Network (NCCN). Survivorship. Version 1.2024. Accessed at https://www.nccn.org/ on April 12, 2024.

Oncology Nursing Society (ONS). Symptom interventions: Sleep-wake disturbances. Accessed at https://www.ons.org/pep/sleep-wake-disturbances on April 12, 2024. Last Revised: July 16, 2024

Written by

The American Cancer Society medical and editorial content team (https://www.cancer.org/cancer/acs-medical-content-and-news-staff.html)

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