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REPORT: Sleep aids

A good night's sleep

Over-the-counter sleep aid products are only short-term solutions, but there are more lasting ways of improving your sleep.

If you've lain awake for hours cursing the clock or watched infomercials at 3 am because you've woken up and can't get back to sleep, you're not alone. Estimates vary, but something like 10-40% of the population has trouble from time

to time either getting to sleep or staying asleep. For up to 15% of people, sleep problems are a long-term difficulty.

Often brought about by a major life stressor like ill health, a new job or a relationship



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break-up, even a few nights' poor sleep can leave you feeling irritable, lethargic and with a sense that you're functioning below par. Over a period of time, insomnia can affect your work, health and relationships.

A constant inability to get off to sleep or stay asleep may well have got you pondering (usually at night when you'd rather be sleeping) about whether to get a little chemical or herbal assistance, perhaps in a product available from a pharmacy.

We asked the experts and had a look at the evidence available to find out how safe and effective these products are. We also sought advice and got some tips to help you get the sleep you may be craving. So rest assured — sleep problems can be treated.

But first, what exactly is insomnia and what causes it?

Insomnia can be transient — that is, just occurring for a couple of days — or short-term, lasting for a couple of weeks. If it occurs at least three times a week for longer than one month, it's classified as chronic insomnia.

Sleep disturbance can be a secondary condition of an illness such as depression or cardiovascular disease, or as a result of physical pain, substance abuse or a side effect to certain medications. It can also be stress-related or due to poor sleeping habits (known as 'sleep hygiene'). Other sleep disorders, which need medical attention, include narcolepsy, restless legs syndrome (an overwhelming urge to move your legs) and sleep apnoea (see page 38).

Insomnia may manifest itself as a difficulty going off to sleep, constant waking throughout the night, or waking early in the morning and being unable to get back to sleep. As we age, sleep problems can






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Antihistamines, valerian and other herbal preparations are the main over-the-counter remedies on offer. They may or may not work for you, some can have side effects and none is recommended for long-term insomnia.

Non-drug tips for dealing with insomnia
— see page 39.



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increase. Older people commonly suffer from insomnia as a reaction to physical pain or as a side effect of medication or illness.

SETTING UP A CYCLE

We've all managed to drag ourselves through a day at work after a late night, but having persistent insomnia can be distressing. Experts can paint a picture of how it might come about.

Some people may have a vulnerability to insomnia in the first place. But usually there's an 'activating event' — a stressful situation like moving home or a sick child. Sleep problems start and then the sufferer starts to expect them and to see themselves as an insomniac. They may find evidence as to why they're not sleeping, put a lot of effort into trying to sleep and try to compensate by spending more time in bed. But then bed becomes a stressful, 'unsafe' place to be.

At this point many people rush to the chemist to get some help in a bottle or jar. Possibly fuelled by the fear of becoming addicted to prescribed drugs, many



sufferers opt for something 'natural'.

We looked at two categories of over-the-counter sleep aid products available at chemists — complementary medicines and restricted Pharmacy Only medicine (which, for insomnia, is antihistamines).

COMPLEMENTARY MEDICINES

We shopped around to see what complementary medicine offered the sleep-deprived, returning with 15 different products. These consisted of preparations that contained solely valerian (five), valerian and magnesium (one) and preparations containing valerian and other herbs (six). Only three preparations didn't contain valerian.

Of all of the popular herbal sedatives, valerian has undergone the most clinical trials to try to establish its effectiveness and safety as a treatment for insomnia. It also has a very long tradition of use as a medicinal herb. Although some of the clinical trials showed possible benefits of valerian as a treatment for insomnia, results were contradictory and therefore inconclusive.

Preliminary findings suggest valerian may improve sleep for children with intellectual disabilities, who commonly suffer from sleeping difficulties, but again more research is needed.





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VALERIAN VARIATIONS

According to the labels of our valerian preparations they contained between 86 and 2500 milligrams of valerian per tablet or capsule. Those that contained less than 1800 mg in each tablet recommended taking two or more at a time, usually 30 to 60 minutes before bed.

In clinical trials, doses of valerian root extract to treat insomnia ranged from 300 to 900 mg, administered half-an-hour to an hour before bed. But in the products we purchased, the recommended dose of valerian ranged from 258 to 4000 mg — a huge variation between brands.

Valerian is also described as “standardised” on many of the labels, but according to Australia’s medicine regulatory body, the Therapeutic Goods Administration (TGA), there’s no definition of the term “standardised” in the legislation.

Although valerian seems to be generally benign, there have been rare reports of liver damage. Stomach upset, headache and vivid dreams are some other rarely reported side effects. Valerian shouldn’t be used during pregnancy or breastfeeding as its safety for such users hasn’t been established — one of the active ingredients in valerian has been shown to be able to cause DNA changes in cells. While risk of cell damage is probably low, it may not be something you’d want to use regularly.

There’s also evidence valerian might take a couple





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Infants and sleep aids

It's common for children under two to have trouble getting or staying asleep (just look how tired their parents often are). While babies' and toddlers' sleep may be disturbed by illness or, like adults, changes such as moving house, it can also be a result of parents misreading their child's tiredness signals or a lack of a daily routine.

Karitane, a support, guidance and information service for parents in NSW, recommends parents learn settling techniques appropriate for their child's age group. A sleep routine, such as always giving a massage or a bath before bed, is also useful as it gives the baby signals that it's time for sleep.

All the over-the-counter medications we bought weren't recommended for children under two, with the exception of **BRAUER Calm**, which claims to be suitable for children from six months to 12 years. Karitane doesn't advocate over-the-counter medication or herbal remedies for sleep assistance with babies. If your child is having severe sleep difficulties, consult a doctor.

Karitane also stresses that parents need support so they have time out and someone to go to for advice about their baby's sleep issues:

- For more information on Karitane's services or to read its guide to children's sleep signals, go to www.swsahs.nsw.gov.au/karitane.
- Type 'insomnia' in the search box at www.choice.com.au and then click on 'More information' for more on community support for parenting in your state, and general information about babies, children, teenagers and sleep.





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of weeks to become effective, by which time the insomnia might have disappeared anyway.

In conclusion, while it does seem that valerian has potential as a sleep aid, most experts agree that further trials need to be carried out to find out more about this herb and its effects.

SLEEP APNOEA

Sleep apnoea, a condition where the sufferer stops breathing for at least 10 seconds, over and over again throughout the night, can be divided into two types. The most common type, obstructive sleep apnoea (OSA), is caused when the airway passage is obstructed during sleep, for instance by the tongue. In central sleep apnoea, a far less common condition, respiration at night is affected by a disorder in brain function; its symptoms and diagnosis are similar but treatment may involve more elements.

OSA can be brought about or hastened by factors such as obesity or weight gain, smoking, alcohol and sedative use. It may also be the result of a person's anatomy, such as enlarged tonsils.

If you suffer from sleep apnoea you'll wake many times during the night (in order to start breathing again), although you may not remember doing so. These constant sleep disruptions usually result in daytime sleepiness. While many sufferers also have a snoring problem that may help diagnosis, it's not always a symptom.

OSA is in fact often undiagnosed, leaving the sufferer tired, irritable and possibly vulnerable to health problems such as high blood pressure, diabetes and coronary disease. Other problems, such as





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The remaining complementary preparations we bought contained a variety of herbs including passionflower, hops and chamomile. These herbs, while traditionally used to treat anxiety and sleeplessness, have limited or no clinical trials to support their safety and efficacy as sleep aids.

Some of the products also contained vitamins and minerals such as calcium, magnesium, vitamin B₆ and vitamin K. We couldn't find any evidence to say the small amounts in these preparations would induce relaxation or sleep.

Most of the products claimed to relieve or help relieve insomnia and sleeplessness, although a product distributed by NUTRA-LIFE claimed to "help calm and reduce nervousness and aid relaxation, particularly in cases of sleep disorders".

We contacted the manufacturers to ask for supporting evidence. Out of 10 companies, we heard back from five: NUTRA-LIFE, BRAUER, BLACKMORES, CARLSON HEALTH and IPA (distributor of SOUL PATTINSON goods), but none added anything significant to the limited evidence we could find for the ingredients. However, all the complementary products are listed with the Therapeutic Goods Administration (TGA), which means they contain well-established ingredients used for a long time and are considered by the TGA to be low-risk.

It's worth noting that even with low-risk medicines, there can be rare cases of adverse effects.





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falling asleep at the wheel, can also result from leaving OSA unchecked.

If you find it hard to stay awake during the day (especially in the afternoon), wake up feeling tired despite the amount of sleep you've had or fall asleep easily in the afternoon, have yourself assessed for OSA. This involves having a polysomnogram — a test measuring various physiological activities while you sleep — to determine if you have the condition.

A number of treatments are available for OSA. Sometimes weight loss, not sleeping on your back and avoiding alcohol and sedatives are enough to manage the condition. In more severe cases, dental appliances may be used to keep the airway open.

Nasal CPAP (continuous positive airway pressure) is considered the most effective, non-invasive treatment for OSA. The CPAP machine has a nasal mask that blows air through the nose and holds the airway open, helping the sufferer breathe regularly through the night.

Surgery is also an option. For children with OSA this often involves taking out their tonsils and adenoids. Occasionally, adults may also undergo surgical procedures for the condition. Studies suggest medication is an ineffective treatment for OSA.





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For instance, an Australian woman was hospitalised after a severe reaction to passionflower. There have also been reports of liver damage from use of preparations containing American skullcap, which we found in one preparation. While rare, these cases are a reminder to be careful when using herbal preparations. Always let your doctor know if you're taking any kind of over-the-counter complementary medicine. Herbal preparations, like other drugs, can modify chemical processes in the body and interact with other medications. As CHOICE has often noted, the problem with herbal remedies is that 'herbal' sounds safe, but they're not tested in the same way as other medications.

ANTIHISTAMINES

The other option for over-the-counter sleep aid products is antihistamines like promethazine and doxylamine.

While these may send some people off to sleep, they can have the opposite effect on others. Antihistamines can also have side effects, most notoriously drowsiness or a hangover effect the next day. They may affect your work or ability to drive a car.

Antihistamines can interact with other medications, including certain kinds of anti-depressant and prescription hypnotics. People with certain medical conditions, such as asthma,

glaucoma and epilepsy, shouldn't use them. Always tell your pharmacist about any medical condition you have or medication you're taking, including complementary preparations, before using Pharmacy Only medication.

If you decide to try them, they're only recommended for short-term use. As with all sleep aid products, if you don't improve see a doctor, as insomnia could be an indication of an underlying medical problem.

Antihistamines aren't recommended for use during pregnancy or breastfeeding. It's not known how safe they are for children under 12, and some children become hyperactive on them. Always get a copy of the relevant Consumer Medicine Information from your pharmacist and ask about anything you don't understand.

Some experts think that even though antihistamines may be acceptable during acute (short-term) insomnia, if medication is required it's preferable to have a doctor prescribe the appropriate drugs. Although it's easier to buy antihistamines over-the-counter, seeing a doctor is useful as they may be able to advise on other ways to combat insomnia. And prescribed medication for insomnia may be more effective, because, as one expert told us, "Antihistamines are worse than prescribed drugs because people's reactions to them are varied."





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Sophia Russell (not her real name) hasn't had a week's worth of uninterrupted sleep for about three years. Although she'd previously experienced sleep problems on and off throughout her life, "It's never been a pattern like now. I'll fall asleep quickly, but after 2 am I'll wake up and fall asleep over and over again. When it's time to get up for work I'm dead to the world."

Sophia doesn't recall a particular stressor that triggered the insomnia, though she does admit to being a worrier.

She's only tried one over-the-counter remedy — an antihistamine the pharmacist gave her. "It made me groggy the next day," she said. "I didn't feel refreshed when I woke up. I tried it for three or four nights but because I felt so bad when I woke up I stopped taking it."

Sophia hasn't seen a doctor about her sleep problems, and hadn't heard about many of the recommended non-drug treatments for insomnia. She'd heard about not using the bed for anything but sleep, "But I watch TV in bed."

The hardest thing about the lack of sleep for Sophia is not lying awake at night, but the exhaustion she experiences the following day at work. "I get so tired in the afternoon. The urge to fall asleep is really strong and I have to get a cappuccino to get a lift."





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EXPERT TIPS FOR GOOD SLEEP

Make sure your room is comfortable — not too hot or cold, with a comfortable mattress on the bed, some fresh air and a minimum of noise (use a white noise machine, a fan or earplugs if noise is a problem).

Establish that the bed is for sleep or sex only — don't work, read, argue or worry there.

People who suffer from sleep disorders often have faulty perceptions about sleep. Experts point out that if you don't sleep you still get sleepy, but a lot of people don't use that fact to help themselves. If you get insomnia you tend to go to bed early and stay in bed late to give yourself the maximum possibility of sleeping. However, when you don't sleep this can create a negative association with going to bed. So don't get into bed until you're really sleepy.

If you don't fall asleep after a period of about 15 minutes, get up and do something relaxing — have a bath, read a book (nothing too stimulating — no thrillers!), listen to soft music — then get back into bed when you're sleepy. Get up again if you still can't sleep. It might take a few goes, but you should eventually nod off.

While a lot of people think having a few stiff drinks is a good recipe for getting off to sleep and staying there, experts say it's a no-no: alcohol disturbs sleep patterns.