

1. Screen

How're you sleeping?

Sleep is Humble because it is really important yet so often overlooked.

Consider asking about sleep if you hear someone say...

I feel tired
I'm struggling to sleep
I get anxious at night
I've odd or unexplained symptoms

I'd like to be healthier
I'd like to lose weight
I'd like to get focused & fitter
I'd like to feel energised

I'd like to help my health conditions, e.g. obesity, diabetes, heart disease, dementia, fertility, inflammatory...

I'd like to improve my mental health, mood, anxiety, depression, PTSD...

I'd like to discuss sleeping tablets
I'm travelling or staying in hospital
I'm working shifts

2. Score

REGARD-ing your sleep What's your challenge?

1. Regular bed & wake up times?

Times varying by more than 1 hour.

2. Enough time to sleep in bed?

This is personal, typically >7 hours.

3. Getting to sleep or back to sleep?

Lying awake in bed for >30 mins.

4. Anxiety or alertness in bed?

Tired & wired or worried at night.

5. UnRefreshed or Unconscious?

Sleepy or struggle to stay awake in the day.

6. Doing odd stuff at night?

Unwanted sleep related experiences.

Option to score days per week for each struggle & track the score over time.

3. Sort

Possible sleep issue



Poor sleep habits

Not setting the body clock with what it needs, during the day & night.



Insomnia

Want to, but feel I can't sleep & trying harder doesn't help.



Obstructive Sleep Apnoea

Snoring & stopping breathing can interrupt sleep.



Disruptor's

These spoil sleep quality often without us knowing.
See below.



Parasomnias

E.g. Sleep walking, Night terrors, Paralysis, Acting out dreams, Restless legs, Periodic limb movements & Parkinson's dis (early sign).

4. Support

Possible options

Improve sleep habits & lifestyle

Set reminders for regular wake up, wind down and bedtimes- use a diary.

Get LEFTSS right in the day

Light, Exercise, Food, Temperature, Soothing & Sleep-space.

Insomnia

Assess Insomnia Severity Index.

Reassure it's common, often curable & "paradoxical" - a misperception. Offer help e.g. CBT-i apps or services.

Obstructive sleep apnoea

Assess Epworth & STOP BANG score.

Help snoring, discuss driving, lifestyle change & refer sleep studies if appropriate.

Disruptors

Manage meds, pain, peeing, menopause

Aim for NO SCAMS (see below)

Support social and habit change.

Parasomnias

These are varied and can be tricky. Some are managed in primary care.

Refer if you're unsure, if the person or partner is in distress or at risk of harm.

Restless legs

Consider lifestyle, iron or other meds.

Common Disruptors

Pain, pets, peeing, menopause, heat, lights, sounds, smells, stress, devices, dependants & drugs.

Aim for NO SCAMS:

Nicotine, Opioids, Sedatives, Caffeine, Alcohol, Marijuana & Screens in bed.

Sleep Aids - consider the person, evidence & use with care

(Below are some examples. Acronym CAMOMILE)

Cold water, Apigenin, Ashwagandha, Massage, bodyscan Meditation, Orexin antagonist, Omega 3 oils, Magnesium threonate, Melatonin, Inositol, Lavender, Lamps & Light blockers, Eye patches & Ear plugs.

Further resources to support sleep

Download the latest version of the sleep tool & sleep tips at: www.humblesleep.com & 20 min [video guide](#).

Sleep Habits

Set your body clock with **regular** wake up, wind down and bed times and aim to get your **LEFTSS** right. [Here's a 12 min sleep tips video](#).



Light

Wake up & see the morning light. Screens off >1 hr before bed. Aim for dark at night.



Exercise

Walk outside in day-light & exercise if you can. Even 1 min out of puff helps



Food

Cut alcohol & caffeine esp after noon. Last meal >3hrs before bed & only drink water after.



Temperature

At bed time cool down with a sip or splash of cold water & set thermostat to 18°C.



Soothe

Soothe your mind with time to relax & unwind. Try a journal, music or candle-lit bath.



Sleep-space

Safe, dark & quiet, just for sleep & sex. If stressed go to a separate sanctuary, relax until you feel sleepy.

Insomnia

Chronic (>3/12) insomnia is common (~10%) and distressing, (impacting mental health & performance) but reassuringly it's not life shortening & it's usually treatable. NICE recommends CBT for insomnia (CBT-I) as sleep hygiene alone is rarely enough.

Below are 6 CBT-I skills that we teach at Humble sleep, also described in [this 10 min video](#).

Set up success	Stimulus control	Sleep scheduling	Soothing strategies	Structure thinking	Set free
Check suitability, respect, reassure & set expectations.	Only sleep & sex in bed. Ideally no stress or screens.	Avoid napping & only go to bed once sleepy.	Body scan, PMR, deep slow breaths, eye roll & relaxing visualisation.	Pause & process, regulate feelings & re-frame ideas.	Plan strategies & support to stay on track.
Set wake up time, start sleep diary & sleep habits.	If awake >20min exit bed and go to a sanctuary.	Record & restrict time in bed by going to bed later.	If you wake be ready with a plan e.g. music, journal...	Filter thoughts, write worries & honour feelings.	Life is about living, not just sleep.

Link to information and insomnia score <https://www.nhs.uk/conditions/insomnia>

Free App: <https://sleepful.me/> - 30min | Free 30 min podcast for patients: <https://www.royalsurrey.nhs.uk/saygoodnight>

Sleep apnoea

Check Epworth & **STOP BANG** score, discuss driving, lifestyle changes & consider referral if appropriate.

Clinical link: <https://remedy.bnssg.icb.nhs.uk/adults/sleep-medicine/obstructive-sleep-apnoea-osa>

Parasomnias

These vary in cause, presentation & management. Consider possible functional, behavioural, neurological & psychiatric approaches.

Clinical link: <https://remedy.bnssg.icb.nhs.uk/adults/sleep-medicine/parasomnias>.

Restless legs syndrome & Periodic limb movements during sleep

Check blood ferritin, consider treating if <75mcg/l. & optimise lifestyle factors. With care consider pregabalin & dopamine drugs.

Clinical link: <https://remedy.bnssg.icb.nhs.uk/adults/sleep-medicine/restless-leg-syndrome>

Dodge Disruptors

Click for links: **Drugs** aim for **NO SCAMS** if possible, see list on page one. **Pain**: explore pain management **Menopausal**: HRT & CBT-i above. Avoid **alcohol** & **caffeine**. No **bright lights**, **pets** or **phones** in the bedroom. If on call, set notifications to "do not disturb".

If you are away from home (e.g. travelling or in hospital) consider taking a **sleep pack** & plan.