



EDITORIAL

SLEEP: THE ULTIMATE RESET BUTTON



It starts the same way for many—a late-night scroll that turns into an hour, a "just one more episode" that becomes three, or a student convinced, an all-nighter is the key to success. The clock ticks past midnight, but sleep is postponed, treated as an option rather than a necessity.

Once revered as the body's sacred healer, sleep is now dismissed as an inconvenience. In a world that glorifies hustle, where screens glow brighter than the stars, and work bleeds into the night, rest is an afterthought. Youngsters proudly declare, "I'll sleep when I'm dead," while adults sabotage their own cycles with binge-watching and endless scrolling. But the body is not so forgiving.

Sleep is not just rest—it is repair. It regenerates tissues, strengthens immunity, and balances hormones. Yet, chronic sleep deprivation fuels stress, anxiety, and emotional instability, making us irritable and less resilient. Neuroscientists warn that lack of sleep impairs decision-making and problem-solving.

The glymphatic system, the brain's waste disposal unit, clears toxins like beta-amyloid plaques—linked to Alzheimer's—during deep sleep. Yet, we disrupt it with artificial lights, caffeine-fueled nights, and a culture that prizes busyness over well-being.

Students cram till dawn, only to struggle with memory retention. Professionals work late, believing they optimize time, but face burnout and poor focus.

Even elders disrupt their sleep with worry, stimulants, and irregular routines, worsening health.

The irony? We know science. Sleep regulates cortisol, processes emotions, and reduces disease risk. Yet, we trade it for temporary gratification, as if we can cheat biology.

Sleep is not a luxury—it is the silent guardian of mental health. It restores the mind, balances emotions, and strengthens resilience against stress.

The most resilient minds do not sacrifice rest; they honor it. In a world that glorifies sleeplessness, dare to rest, as choosing rest is self-preservation.

-Dr Sripriya Shaji Ph.D
Co-Editor, Mind Matters

PRESIDENT MANISHA MANGHANI ROTARY CLUB OF NAGPUR NORTH

President of RC Nagpur North Rtn. Manisha Manghani is a freelance fashion designer and co-founder of CASA 1775 - a luxury gifting company. She was born and brought up in Chennai and is the eldest amongst the three sibling sisters. Her husband Rtn. Raju Magnani is an entrepreneur. The couple is blessed with two daughters who are successful in their careers.



Manisha starts her day with meditation, gratitude and exercise. Her healthy habits include getting up early, sitting in the Sun for exercising and yoga, drinking a lot of water, eating seasonal fruits and vegetables. She opts healthy and age-appropriate foods and never forgets to wear her smile. Her happiness mantra is to accept people and situations as they are; without much expectations.

Manisha has served as Director of Projects in DAGMHI 3030 India. She wants to rejoin the action group, and understands that mental health is the most important aspect of health. She believes that it is a great initiative and feels proud that it has been recognised not only in the district, but also nationally and internationally. She strongly believes that we as a community are doing great projects; making people realise that talking about mental health is as essential as physical health.

Taking the work ahead by one step, she decided to address 'Exam Stress and Anxiety'. She recently has created videos with Rtn Psychologist Rita Aggarwal to address the issue. Her efforts were well appreciated by many parents and students in Rotary and outside.

-Dr. Aabha Pimprikar
Co-Editor



GRATITUDE

We thank PDG Ramesh Meher for the generous donation of INR 21,000/- to DAGMHI 3030 India. The Cornerstone of DAGMHI 3030 has been laid in his tenure and he has been supporting the action group since then.

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THE NEUROSCIENCE OF SLEEP: UNLOCKING THE SECRETS OF GOOD NIGHT'S REST

We spend approximately one-third of our lives sleeping, but few of us understand the complex mechanisms that govern this essential process. Our bodies have an internal clock that regulates our sleep-wake cycle, also known as our circadian rhythm. This internal clock is controlled by a small group of cells in the brain called the suprachiasmatic nucleus (SCN), located in the hypothalamus. The SCN responds to light and darkness to synchronize our bodily functions with the 24-hour day-night cycle. **The circadian rhythm influences various physiological processes. The release of hormones, such as melatonin and cortisol, is regulated by the circadian rhythm.** Our body temperature naturally drops during sleep and rises during wakefulness. Our metabolic rate slows down during sleep and increases during wakefulness.

Melatonin, the sleep hormone, is produced by a small endocrine gland located in the brain, known as the pineal gland. It plays a crucial role in regulating our sleep-wake cycle. Melatonin levels increase as the sun sets, promoting relaxation and sleepiness. The levels remain high during sleep, helping to maintain sleep quality and drop as the sun rises, allowing us to feel alert and awake.

Sleep is regulated by a complex interplay of neurotransmitters, hormones, and brain regions. **The sleep-wake cycle is divided into two main stages: non-rapid eye movement (NREM) sleep and rapid eye movement (REM) sleep.** NREM sleep is further subdivided into three stages, each characterized by distinct brain wave patterns. REM sleep is marked by rapid eye movements, increased brain activity, and vivid dreams.

Sleep serves multiple purposes. Sleep helps strengthen and process memories, transferring information from the hippocampus to long-term storage. It allows our bodies to repair and regenerate tissues, build bone and muscle, and strengthen our immune systems. It helps regulate emotions, reducing stress and anxiety. Sleep enables the brain's waste removal system, known as the glymphatic system, to clear toxins and proteins associated with neurodegenerative diseases, thus serving a housekeeping function.

The National Sleep Foundation recommends the following amounts of sleep daily.

- Newborns (0-3 months): 14-17 hours
- Infants (4-11 months): 12-15 hours
- Toddlers (1-2 years): 11-14 hours
- Preschoolers (3-5 years): 10-13 hours
- School-age children (6-13 years): 9-11 hours
- Teenagers (14-17 years): 8-10 hours
- Adults (18-64 years): 7-9 hours
- Older adults (65 years and over): 7-8 hours

Sleep disturbances are one of the most common and, oftentimes, the initial presenting symptoms of most mental health conditions including depression, anxiety, psychosis, bipolar disorder, PTSD, etc. Correcting sleep disturbances can help patients recover faster. **Chronic sleep deficit** due to shift work, jet lag, long work hours, excessive screen use, etc **can also trigger mental health issues in vulnerable individuals.**

In conclusion, sleep is a complex and essential process that plays a critical role in our physical and mental well-being. By understanding the neuroscience of sleep, we can better appreciate the importance of prioritizing sleep and maintaining healthy sleep habits.

-Dr. Abha Bang Soni
Consultant Psychiatrist, Nagpur

POLYSOMNOGRAPHY (SLEEP STUDY)

Polysomnography (PSG) is a painless study that measures how you sleep. It is helpful in diagnosis and treatment of sleep disorders as well improving the sleep quality.

Though there are other sleep tests like Multiple Sleep Latency Test (MSLT), Maintenance of Wakefulness Test (MWT) and Home Sleep Tests (HST); **Polysomnography is considered the gold standard test** for diagnosing various sleep disorders as it **provides the most comprehensive and accurate measurement of various sleep parameters** like your brain waves, eye movements, muscle (chest, belly and limb) movements, breathing pattern, snoring and important vital signs such as oxygen levels, heart rate, etc.

Your doctor may recommend PSG

- 1.To diagnose obstructive sleep apnea (OSA), other sleep related breathing disorders, narcolepsy (with MSLT), REM sleep related disorders, Parasomnia and seizure disorder, periodic limb movement disorder
- 2.To check your sleep behaviours (sleep walking)
- 3.As a preoperative study before the surgery to treat snoring or OSA and as a follow-up post surgery
- 4.CPAP/BiPAP (machines that maintain Positive Airway Pressure to treat sleep apnea and other breathing problems) overnight titration for the treatment of OSA

Paediatric PSG (sleep study for a child) is indicated for:

Snoring, mouth breathing, disturbed sleep, bed wetting, irritability, hyperactivity, aggression, lack of attention, Growth retardation &/or developmental delay, daytime sleepiness and certain symptoms related to sleep which are not getting managed after routine clinical evaluation eg. fearful midnight awakenings, sleep talking, sleep walking, confusional arousals, nightmares, night terror.

There is no need to do PSG for

- Routine evaluation of insomnia
- Insomnia associated psychiatric disorders
- Uncomplicated parasomnias where clinical evaluation is sufficient.
- Seizure disorder with no nocturnal complaints

-Dr. Yogesh Shankar Pawar
Fellow, Sleep Medicine-ISDA, Nashik



Sleep Study Levels

What are the differences between a Level 3, Level 2, and a Level 1 sleep study?

		LEVEL 3	LEVEL 2	LEVEL 1
LOCATION	At-home	✓	✓	-
	In a lab/centre	-	-	✓
OBSERVED BY	Technologist (RPSCT)	-	-	✓
	Technologist (RPSCT)	-	-	✓
WHAT IT MONITORS	Breathing activity	✓	✓	✓
	Snoring	✓	✓	✓
	Airflow	✓	✓	✓
	Oxygen levels	✓	✓	✓
	Heart rate	✓	✓	✓
	Brain activity	-	✓	✓
	Muscle activity	-	✓	✓
	Sleep quality (onset time, efficiency, REM and non-REM, sources of disturbances)	-	✓	✓
WHAT IT DIAGNOSES	Sleep apnea	✓	✓	✓
	Leg & body/PLMD	-	✓	✓
	Narcolepsy* (MSLT req. to complete diagnosis)	-	✓	✓
	REM Sleep Behaviour Disorder	-	-	✓



SLEEP IN TEENAGERS & SCHOOL TIMINGS: A DISASTROUS MISMATCH

In humans, the sleep patterns show multiple changes over the lifespan. Infants have a “multi-phasic” sleep, i.e. sleep and wakefulness through a 24-hour cycle. In the toddlers and during primary school years, the sleep timings and phases are closer to adults, i.e. sleeping towards late evening and awakening at/after sunrise. **In the teenage years, there is a “phase delay” in sleep, i.e. their brains are biologically inclined to sleep later by about two hours, and similarly, awakening two hours later.** Whereas an adult would feel sleepy, say, by 10 pm, and awaken by 6 am, a teenager would feel sleepy only by 12 pm and awaken by 8 am. These changes are biological, brain-related, and not a matter of choice. This phenomenon is little-known, and consequently, a teenager who finds it difficult to awaken before 8 or 9 am is labeled as “lazy”, “avoiding school”, or “irresponsible” across all cultures.

In most parts of the world, including India, the school timings for the middle and secondary schools, (students being in their teenage years), start at or around 8 am. Due to this, a teenager is required to leave bed by 6 or 7 am., cutting his or her sleep by a full two to three hours. Thus, for example, a teenager who has slept (or, rather, who could not sleep before 12pm., had to awaken by 6 am., and thus gets to sleep for only about 6 hours, as against her sleep requirement of eight to nine hours.

Human sleep comprises two phases – the Non-Rapid Eye Movement Sleep (NREM), and the Rapid Eye Movement Sleep (REM). The NREM makes about 80 to 85% of our sleep, the remainder 15% being the REM. The NREM is associated with physical repair, energy conservation and some helpful immune and metabolic functions, whereas **the REM is associated with memory consolidation, learning, creativity, and emotional processing.** These phases occur in roughly one-hour cycles throughout the night. The first half of the night is associated with more of NREM sleep, and the second half with the REM.

A cutting down of the crucial REM sleep in the morning by about two hours abolishes the functions of memory consolidation and learning, i.e. learnt material is prevented from forming long-term memories – a consequence, which can be disastrous in school years when new learning, from the academic point of view, is THE crucial brain activity. **Since REM is also associated with emotional regulation, an REM deprivation early in the morning is associated with emotional difficulties like increased irritability and other behavioral problems** like disobedience, defiance and aggression, so commonly seen in teenage years. Many of the characteristics like being “moody”, “unpredictable”, or “irritable”, are more a consequence of REM deprivation rather than the “difficult teenage years.”

Having realized this, in many states in the USA, in Germany and Singapore, often propelled by activist groups, have delayed the school timings, with schools starting not earlier than 9 am. Scientific studies carried out in teenagers after the changed school timings have consistently shown various positive outcomes, like improvement in grades, emotional regulation, behavior, concentration, and interestingly, a smaller number of car crashes. Parents and teachers in such regions too have consistently reported observing significant positive changes in their teenagers after the changed school timings. India can also follow such a policy of starting middle and high school by 9 am.

-Dr. Sudhir Bhawe
Psychiatrist, Nagpur

IMPACT OF MOBILE PHONE USAGE ON SLEEP PATTERNS AND WELL-BEING OF ADOLESCENT GIRLS (A RESEARCH STUDY)

Introduction: The growing dependency on mobile phones among adolescents has raised concerns about its impact on sleep patterns and overall well-being. Excessive screen time, especially before bedtime, has been linked to poor sleep quality, affecting both mental and physical health. This study examines the relationship between mobile phone usage and sleep disturbances among adolescent girls.

Objective: Is to analyze the Impact of Mobile Phone Usage on Sleep Patterns and Well-Being of Adolescent Girls and to create awareness about sleep hygiene practices to promote healthier sleep patterns.

Methodology: A survey-based study was conducted among 200 adolescent girls from Bharathidasan Government College for Women, Puducherry. Data collection was done using a structured questionnaire via Google Forms. The questionnaire included demographic details, mobile phone usage habits, and sleep quality assessment using the Pittsburgh Sleep Quality Index (PSQI).

Results and Discussion:

•**Excessive Screen Time:** Nearly 45% of the respondents reported using electronic devices for over nine hours daily, significantly exceeding the recommended screen time.

•**Disrupted Sleep Patterns:** About 92% of participants had irregular sleep schedules, with 68.5% experiencing frequent night awakenings.

•**Poor Sleep Quality:** Over 53% of students exhibited poor sleep quality (PSQI >5), with significant associations between electronic device use and sleep disturbances.

Conclusion

This study highlights the strong association between mobile phone usage and poor sleep quality among adolescent girls. To address this issue, an awareness program on sleep hygiene was conducted, focusing on maintaining a consistent sleep schedule, limiting screen time before bed, practicing physical activity, and creating a conducive sleep environment.

Given the high prevalence of poor sleep quality, it is crucial for parents, educators, and health professionals to promote healthier screen habits and sleep practices. Schools and Colleges should integrate sleep hygiene education into wellness programs to help students understand the consequences of excessive mobile phone use on their health.

-Kayalvizhi Balamurugan

-Priyadharshini R

Assistant Professors, Puducherry

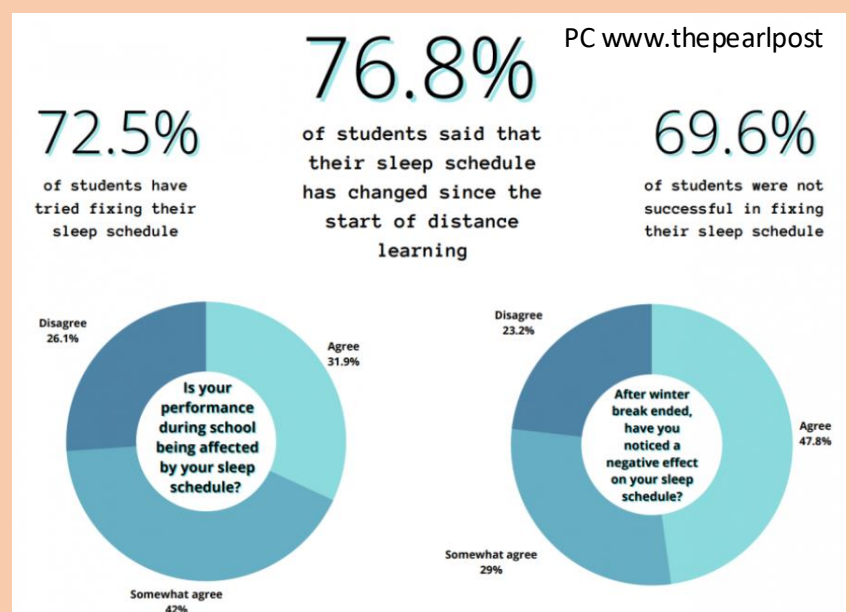
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SLEEP AND HORMONES: A WOMAN'S JOURNEY

For women, sleep is a lifelong adaptation issue, from puberty to pregnancy to menopause and beyond. The hormonal axis, especially in women and the sleep hormones and cycles are known to influence each other.

Birth to Teens:

As hormonal influence in the body begins at puberty, the sleep pattern begins to change. Girls begin to experience the changes of puberty at 8 years and menstruation between 10-14 years. **The sleep induction time shifts by an hour or two.** So teens begin to sleep later and struggle to wake up early in the morning. The hormonal changes seen during a menstrual cycle are mainly the estrogen in the first half and progesterone in the latter half of the cycle. The rise in progesterone in the phase before the periods causes water retention and also influences the sleep pattern. Some girls will lose their sleep while some will be drowsy in the premenstrual phase.

Poor sleep habits and disorders:

Staying up late has become a major risk factor. A recent survey found that many young adults sleep as late as 2 AM, reducing their total sleep duration to less than the recommended 6-8 hours. **This disrupted sleep pattern is a major contributor to hormonal imbalances, particularly Polycystic Ovarian Syndrome (PCOS) in women and girls. A poor lifestyle which may be a result of altered sleep wake cycle, poor dietary habits has led to a marked rise in the incidence of 1 in 4 PCOS cases in recent years.**

Pregnancy related issues:

Pregnancy hormones change the sleep pattern along with the pressure symptoms of the growing baby and the increase in the frequency of urination makes it still difficult. **Breastfeeding is a natural break to the previous sleep patterns** with a decrease in the number of hours available for sleep at a stretch. And this can worsen an already existing problem of diabetes, hypertension, depression and anxiety. Mothers need to catch those little nap breaks when not breastfeeding and try to maximize the rest.

Menopause:

The phase of perimenopause begins by 40 years which marks the decline of the estrogen hormone in the body. This causes a change in the sleep induction time to difficulty in sleep maintenance to a feeling of not waking up fresh. In addition are the hot flashes, night sweats, thought clouds and storms, and urinary issues. **All in all the sleep pattern goes on an off-beat-track.** Post menopausal women find it difficult to sustain sleep well and also the vaginal dryness and urinary problems worsen the sound sleep.

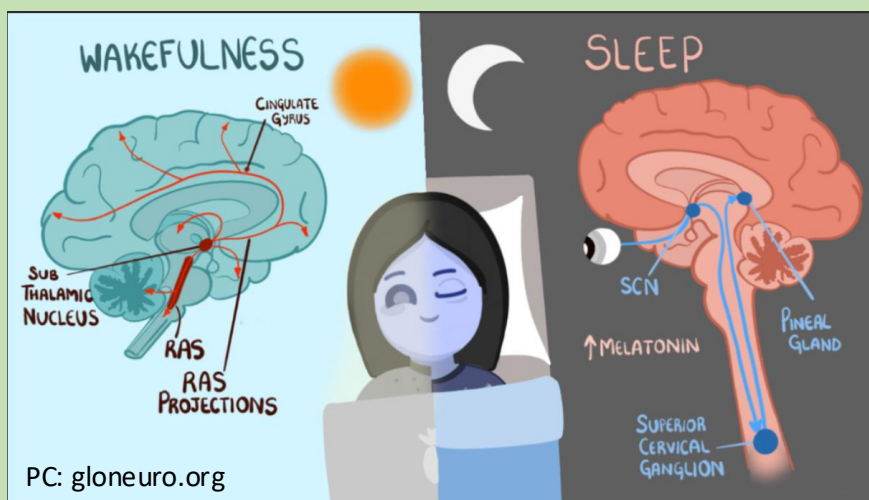
Balanced nutrition, mindfulness practices, regular exercise along with good quality and adequate sleep are essential for good health and hormonal balance.

-Dr.Gauri Karandikar

Obstetrician and Gynaecologist, Nashik

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PC: gloneuro.org

MAD HATTER'S PARTY NIGHTS: THE GUT-SLEEP-MIND AXIS

In Wonder Gut Land, the Mad Hatter's tea party has lost its sparkle. His once-vibrant energy is replaced by sluggishness, forgetfulness, and erratic moods. Alice watches, concerned, as midnight feasts, endless sugary tea, and glowing screens take over. The March Hare can barely stay upright, and the Dormouse is perpetually groggy. They proudly call themselves the 'Night Owls Gang,' yet they are exhausted and gloomy.

Alice seeks out the Master Rabbit, voicing her worries. **"The more they sacrifice sleep, the more their mental clarity and emotional balance suffer,"** he explains. "It's not just about tea—poor choices take an unseen toll."

Red Hat Rabbit, ever wise, chimes in: **"Night Binge Eating Disorder (NBED) and excessive screen time disrupt natural rhythms. These habits wreck metabolism, ramp up stress, and steal sleep."** Alice listens intently. Sugary treats at night cause gut inflammation, disrupting serotonin production. Meanwhile, blue light from enchanted screens blocks melatonin, pushing sleep further away. A vicious cycle begins—cravings and poor sleep feeding each other.

Red Hat Rabbit guides Alice and Mad Hatter to meet the Circadian Keepers, mystical beings who protect the connection between the gut microbiome and the circadian rhythm. The Keepers explain: **"Gut bacteria help regulate serotonin, which turns into melatonin to aid sleep."**

Alice gasps, **"So a sick gut disrupts serotonin... and that messes with both sleep and mood?"** "Exactly!" affirms Red Hat Rabbit. **"When sleep is disturbed, gut health declines, creating a vicious cycle."**

Red Hat Rabbit continued, sleep is the brain's filing system. During deep sleep, the brain consolidates memories. REM sleep enhances creativity and problem-solving. Skipping REM weakens cognitive function. The Insomnia Imps, mischievous creatures, lure them into midnight snacks, caffeine, and skipped meals—habits fueling gut dysbiosis and inflammation. A wise Melatonin Moth warns: **"High-sugar diets destroy gut bacteria, causing restless sleep."**

Red Hat Rabbit offers advice: "Eat fiber-rich and fermented foods, stick to regular meal times, and avoid late-night caffeine and sugar."

"Good news!" he proclaims. "Sleep debt is reversible. Establishing routines, limiting screen time, and prioritizing rest restores cognitive function, emotional stability, and self-discipline. It's not about sleeping more—it's about sleeping better."

Tonight, they choose rest as a power move. Sleep isn't weakness; it's triumph. A well-rested body and mind thrive.

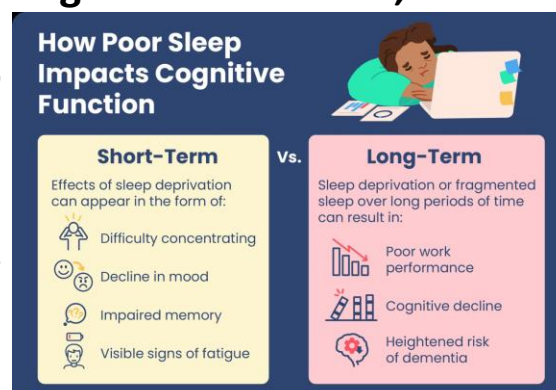
Mad Hatter and his friends learn that sleep isn't passive; it's a tool for the brain and body. When we sacrifice sleep, we deprive ourselves of emotional regulation, cognitive function, and resilience. Weeks later, Mad Hatter, brimming with energy, raises a cup of herbal tea. "All thanks to Wonder Gut Land!" The Insomnia Imps are defeated, and the binge cycle is broken.

Alice smiles, knowing that the secret to a happy ending was hidden in plain sight—restoring sleep. She reinforced; **sleep is not just physical rest; it is the ultimate reset button. Strengthening memory and resilience, it prepares them to wake up with creativity and clarity.** The Mad Hatter's party is no longer chaotic but a celebration of balance and joy.

-Dr Sripriya Shaji Ph.D

**Counselling Psychologist & Nutritionist,
Kozhikode**

PC: sleepfoundation.org



SLEEP DEPRIVATION

Sleep deprivation is when you are not sleeping enough (or) you are not getting good quality sleep. When it continues over an extended period, it can cause very disruptive effects that interfere with even the most routine activities. **Insomnia and sleep deprivation are closely related** but are not the same thing. Insomnia is when you are unable to sleep even effortfully you try. Sleep deprivation happens when you don't give yourself enough time to sleep and don't get enough sleep (or) both.

How does sleep deprivation affect the body?

Your body needs sleep to regenerate certain organ systems and carry out certain processes. Sleep deprivation has negative effects in multiple ways throughout our body-

- Sleep deprivation has long-term damaging effects on your heart and circulatory health.
- People with chronic sleep deprivation are at a much higher risk of developing type 2 diabetes.
- Our body's natural defences against infections can't work properly if you are not getting enough sleep.
- Who are not sleeping enough, they feel pain more easily, the pain is more intense (or) both.
- Sleep deprivation has very negative effects on how our brain works. It plays key role in the development of Alzheimer's disease.
- Sleep deprivation either affects our physical health (or) mental health

Mental Health Effects of Sleep Deprivation

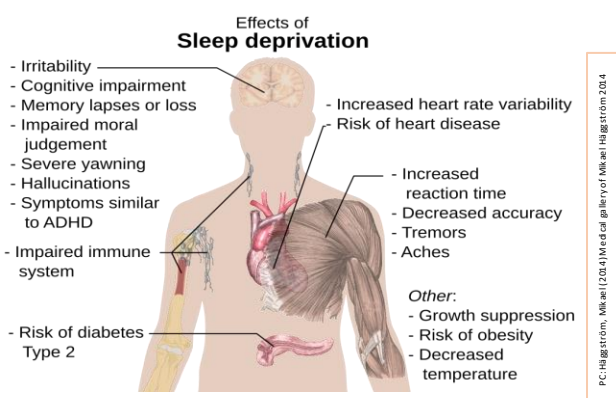
- **Increased Anxiety and Depression:** Sleep deprivation affects the brain's ability to regulate emotions, leading to heightened feelings of stress, anxiety, and depression.
- **Cognitive Decline and Poor Decision-Making:** Lack of sleep impairs concentration, problem-solving skills, and critical thinking. Chronic sleep loss can make everyday tasks feel overwhelming.
- **Increased Risk of Mood Disorders:** Individuals with prolonged sleep deprivation are at a higher risk of developing mood disorders such as bipolar disorder and major depressive disorder.
- **Psychotic Symptoms:** Severe sleep deprivation can lead to hallucinations, paranoia, and symptoms resembling schizophrenia in extreme cases.
- **Higher Suicide Risk:** Studies indicate that chronic sleep disturbances can exacerbate psychiatric symptoms and increase the risk of suicidal thoughts, particularly in adolescents.

"Just like our electronics need to be charged, sleep may recharge (or) reset the brain to optimize functioning," -says Elizabeth Blake Zakhrin, (a clinical psychologist specializing in anxiety, sleep disorders, and mental health, formerly an Assistant Professor at Columbia University Medical Center).

Those with mental health disorders or even more likely to experience chronic sleep problems and in turn these sleep problems are likely to exacerbate psychiatric symptoms and even increase risk for suicide

Sleep problems involve destroying the relationship between mental health and physical health. We should all take to improve the quality and quantity of our sleep in our scientific way.

-Dr. Appanaswamy
Homeopathy practitioner & Psychologist,
Chennai



SLEEP HYGIENE

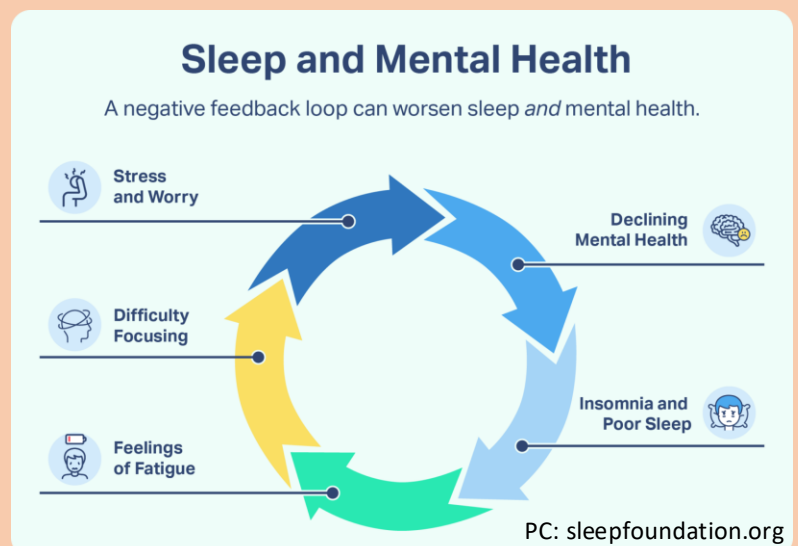
“Sleep hygiene” is a term used to describe good sleep habits. Good sleep is essential for physical and mental well-being. Although the amount of sleep you need changes according to age. Sleep hygiene considers both environmental factors and habits.

- **Keeping a consistent sleep schedule** helps to form good habits. Sleeping and waking up at the same time everyday reinforces the body's sleep cycle and can help reduce daytime drowsiness.
- **Having a relaxing bedtime routine**, like, warm bath, meditation, listening to music and reading books helps your body to prepare for sleep. The best time to start a routine is 30-60 minutes before bedtime.
- **Avoid screen time at least 30 minutes before bedtime.** Blue light of the screen can disrupt sleep.
- **Exercising regularly can improve sleep quality** and overall health. Avoid doing exercises one or two hours before bedtime.
- **Limit caffeine intake** because caffeine can affect sleep.
- **Limiting large meals before going to bed** can improve sleep. **Avoid alcohol and nicotine** as they affect sleep quality.
- **Sleep environment is very necessary to fall asleep.** Keeping the bedroom cool and comfortable, drawing curtains to avoid any lights can help sleep better.
- Use bed only for sleeping, this helps to build the association in the brain that bed is only for sleeping.
- Going to bed only after tired can help boost sleep quality and help sleep better.
- Avoid taking naps during the day which becomes very difficult to sleep at night.

Sleep hygiene is nothing but improving sleep habits. These are some of the tips which can improve sleep. If there are sleep issues, then it is necessary to consult a psychiatrist to determine the cause.

-Mrinmayee Salaskar

Counselling Psychologist



Teens & Sleep

<p>TEENS NEED</p> <p>8-10</p> <p>HOURS OF SLEEP EACH NIGHT</p>	<p>FATIGUE CAUSES</p> <p>100,000</p> <p>TRAFFIC ACCIDENTS EACH YEAR</p>	<p>Effects of sleep deprivation</p> <ul style="list-style-type: none"> - MENTALLY 'DRIFTING OFF' IN CLASS - POOR DECISION MAKING - REDUCED SPORT AND ACADEMIC PERFORMANCE - RISK-TAKING BEHAVIOR - INCREASED NUMBER OF 'SICK DAYS' FROM SCHOOL - CONCENTRATION DIFFICULTIES.
<p>MOST TEENS GET</p> <p>6-7</p> <p>HOURS EACH NIGHT</p>	<p>TEENS WHO PUT DOWN THEIR PHONES AN HOUR BEFORE BED GAIN AN EXTRA 21 MINUTES OF SLEEP EACH NIGHT.</p>	

SLEEP DISORDERS AETIOLOGY & MANAGEMENT

Sleep disorders collectively affect one's quality, duration, and timing of night time sleep. Chronic untreated sleep disorders can interfere with our daily life functioning and contribute to medical as well as mental health problems. A person suffering from sleep issues may typically find it hard to fall asleep (early insomnia), wake up frequently during the night (middle insomnia) or awaken earlier feeling exhausted (late insomnia), causing day-time drowsiness and lethargy.

International Classification of Sleep Disorders (ICD) divides sleep symptoms into: **insomnia** (lack of sleep), sleep related breathing disorder (**obstructive apnoea**), central disorder of hypersomnolence (**narcolepsy**), **circadian rhythm disorder** (in shift workers), **parasomnias** (somnambulism, somniloquy), and sleep related movement disorder (**restless leg syndrome, bruxism**).

Sleep disorders are a common **outcome of multiple risk factors** exacerbated by life events or other illnesses. **Genetic vulnerability to neurochemical imbalances** (orexin/ melatonin) can interfere with pathways which modulate wakefulness. This can also occur **during chronic cortisol elevation** seen in prolonged stress periods, or use of **psychoactive substances** before bedtime, or as an adverse effect of certain **prescription medications**. **Comorbid medical conditions** like neuropathic pain, other physical/ visceral pain syndromes, obesity, asthma, and cardiovascular diseases also present with sleep difficulties, just like in clinical depression and/ or anxiety. Lack of adequate or quality sleep often proceeds into chronic fatigue, perceived memory deficits and impaired decision-making ability in patients, further impacting their personality, performance, and self-confidence negatively.

The commonest and easiest way to treat sleep disorders is to implement sleep hygiene measures. This includes having a sleeping routine and creating an optimal sleeping environment (cool, quiet, dark room, use of white noise). This regimen recommends avoiding physical activity, heavy meals, chocolate, caffeinated drinks, nicotine, alcohol, or screen time in the later half of the day, and advises to use the bed for no other activity other than sleep or intimacy. Managing stress levels, avoiding day-time naps, and incorporating relaxation techniques in the routine are also advised.

Other means to address sleep issues are use of **specified prescription medications by a specialist**, treating underlying physical/ mental disorders, use of devices like CPAP (continuous positive airway pressure) machine for sleep apnoea, light therapy, and CBT-I (cognitive and behavioural therapy for insomnia). CBT-I lasts for 6-8 weeks and works on recognising and challenging negative beliefs that contribute to an individual's sleep problem (cognitive restructuring). Some clients benefit with the use of a sleep diary to identify problematic sleep patterns to be addressed with specific interventions. Interventions like SRT (sleep restriction therapy) – restricting sleep under supervision intentionally in order to reset sleep-wake cycle, SCT (stimulus control therapy) – identify and improving faulty sleep habits, Paradoxical Intention – remaining passively awake and letting go of the worry around insomnia, which helps you unwind and eventually fall asleep, and Biofeedback – using sensors that measure our physiological functions to help control body's anxiety response which impacts sleep pattern can be helpful. Occasionally, techniques like hypnosis, abdominal breathing, progressive muscle relaxation (Jacobson's PMR) are also used to supplement the therapy process.

-Dr Bhakti Murkey

Associate Professor in Psychiatry, Udaipur

TIRED OF TOSSING & TURNING? TRY THESE FUN WAYS TO SLEEP BETTER

Have you ever lied in bed, staring at the ceiling, thinking, "Why can't I just fall asleep?" Turns out your thoughts might be the culprit here!

One effective way to break this cycle is **Cognitive Behaviour Therapy for Insomnia (CBT-I)**. Sounds fancy, but really it's about tackling those pesky sleep-related thoughts that keep you up like, "If I don't sleep eight hours, I'm doomed". CBT-I encourages you to replace that with "It's okay if I don't sleep perfectly tonight – I'll still survive tomorrow."

Another is **sleep restriction**. This might sound strange, but it works! You limit your time in bed to just the hours you're actually sleeping, which helps your body recognise the bed as the "Sleep zone", not the "Let's stress about everything" zone.

Then there's **mindfulness**. One such technique is *body scanning*, where you mentally check in with each part of your body individually, letting go of tension as you go from head to toe. Mindfulness involves being present, so a relaxation practice that focuses on the sounds around you or the sensation of your breath moving in and out helps calm the nervous system. Other activities, such as **Progressive Muscle Relaxation and guided imagery**, also help in similar ways, and all of this can be done before bedtime!

If these tips aren't enough to quiet your mind at night, a therapist can help you dive deeper into these techniques and tailor them to your unique sleep challenges.

-Anjali Anil Salani
Therapist

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