



# WHAT NORMAL SLEEP CHANGES CAN BE EXPECTED AS YOU AGE?

CANADIAN SLEEP SOCIETY, CANADIAN SLEEP AND CIRCADIAN NETWORK,  
AND IMMERSCIENCE

**The Canadian Sleep and Circadian Network (CSCN),  
the Canadian Sleep Society (CSS) and Immerscience**  
are proud to contribute to **World Sleep Day**,  
held on **March 15th, 2019**.

Getting sufficient and good-quality sleep is a key to aging well, as it improves the odds of physical, cognitive and emotional health. Did you know that **unsatisfactory sleep is NOT a hallmark of aging?**

This year, the focus is on **sleep and aging**. Our organizations are happy to share valid information and proven tips on sleep in older ages.

World Sleep Day (WSD) is an annual call to action regarding the importance of healthy sleep. The focus of WSD is to publicize the many burdens of sleep problems, the importance of healthy sleep, and the efforts being taken toward preventing and managing sleep disorders.

[#worldsleepday](#)

[@\\_WorldSleep](#)

# FIVE WAYS TO MAINTAIN SOUND SLEEP AS YOU AGE

## 1. Make your sleep a health priority.

**If you have sleep concerns, talk about them and take action!**

- Discuss your dissatisfaction or what others are saying about your sleep (snoring, moving, etc) with your doctor or a healthcare provider who understands sleep.
- If you take medication, discuss its potential sleep-related side effects with your pharmacist or physician.
- If you are a woman discuss, the menopausal symptoms that interfere with your sleep (e.g., night sweats and hot flashes).

## 2. Adopt a *regular* sleep-wake cycle that results in restfulness.

## 3. Create an optimal environment for sleep. This can include:

- A quiet and dark room held at a comfortable ambient temperature.
- If necessary, do not hesitate to sleep in a separate bed or room to protect your sleep quality and that of your bed partner.

## 4. Maintain healthy sleep hygiene -

**Good health and good sleep go hand in hand.**

- Stay active, eat well and get exposed to daylight and lighting as much as you can.
- Don't overeat or exercise intensely near bedtime.
- Limit or avoid alcohol, caffeine and nicotine. Refrain as much as possible from using substances (alcohol, sleeping pills, etc.) close to bedtime or to induce sleep.
- Diminish stress and worries before bedtime as much as you can. Use relaxation techniques, perform relaxing activities (e.g., mandalas, knitting, etc.), or make a "to do list" to empty your mind.
- Try to stay away from night-work or night shifts if possible.
- If you experience jetlag, allow yourself some time to adjust to this new time.

## 5. Don't over-stress about sleep.

Age-related sleep changes are to be expected and normal. However, you should seek advice from a sleep expert if they are drastic, cause excessive sleepiness and/or negatively impact your daily activities.

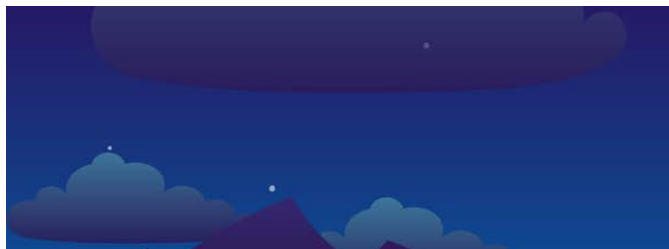
# WHAT NORMAL SLEEP CHANGES CAN BE EXPECTED AS YOU AGE?

Regardless of your age, it is not normal to sleep poorly and not feel rested upon awakening. If you are not satisfied with your sleep, you constantly feel sleepy or you do not feel like your best self during the day, you should consider making lifestyle changes and seek a medical advice. Sleep should never be overlooked at any age, because poor sleep can mask the symptoms of an underlying medical condition that requires your attention.

**Poor sleep is not inevitable.**

**There are solutions that can help you sleep and feel better.**

As time passes, the normal aging process brings with it physical changes as well as alterations in your sleep patterns. Even if you do not suffer from specific sleep disorders, medical issues or psychological problems, your sleep will change as you age, just as gray hair will appear or your skin will wrinkle. Sleep modifications are part of normal aging and may or may not impact your daily activities.



It is a common misconception that we need much less sleep as we age and sleep is automatically less satisfying among older individuals. It is true that sleep becomes more fragile as we get older and that even if some elderly individuals may need less sleep than their younger selves, the actual decrease is relatively small. Most of the time, an aging individual's sleep need remains the same in terms of its duration, but changes are seen in “how ” and “when” sleep occurs. Compared to young adults, older individuals may or may not sleep less during a 24-h period, but clear differences are seen in their sleep quality and schedule.

For example, someone passed 60 years old may experience the following:

- Bedtimes and wake-up times are earlier than when they were in their 40s.
- Less sleep is needed during the night
- Increased sleep needs during the day, which are fulfilled by restful napping.
- Lighter sleep, which is often reflected by more frequent disruptions (i.e., awakenings) and less time spent in the deep-sleep stage.
- Difficulty remaining asleep, especially in the second half of the night close to morning awakening.

Please note that excessive sleepiness is always suspicious; at any age, you should make sure it is not signalling a sleep trouble (e.g., insomnia, apnea, narcolepsy, etc) or a medical or psychological condition. However, when associated with the normal aging process, napping when feeling sleepy efficiently compensates for shorter sleep at night.

Ultimately, your aging body adapts, the need to sleep balances itself and your total sleep duration in a 24-h period approximates that of your younger adult self. These age-related differences in sleep patterns are just as normal as the sleep changes you experienced as you grew from a baby to a child, and then an adolescent. However, now (as then) you must consider and adapt to these changes so you can continue to feel satisfied with sleep and rested during the day.



## Time to sleep: the impact of an aging biological clock

A lot of people are not aware of the biological forces that regulate their sleep-wake cycle. One innate mechanism is the biological clock, which is situated in our brain and control the urges to go to sleep at night and be active during the day. This internal timekeeper is responsible for the sleep-wake cycle and, as we age, it starts to exhibit a weaker and earlier timing that affects our sleep schedule and sleep quality. This partly explains the above-described age-related changes in sleep (earlier bedtimes, earlier awakenings, more napping and shallower sleep).

The weakening of sleep means that as we aged we become more sensitive to challenges imposed upon our sleep-wake cycle. For example, passed our forties we often adapt more slowly to jetlag or shift work, and we have more difficulty or take longer to recover from sleep deprivation. They may also suffer from other age-related conditions that challenge sleep, such as nocturia (the need to urinate at night). Thus, the older we are, the more sleep weakens, the more we must take extra care a regular sleep schedule.



## To nap or not to nap, that is the question!

Sleeping during the day typically has a negative effect on nighttime sleep, as it diminishes the pressure to go to sleep at night and may cause insomnia symptoms. However, because of the age-related changes in our biological clock, napping does not necessarily have this negative effect in older people. An extreme need to sleep every day might signal an underlying problem, even later in life, and thus warrants a trip to your doctor. If you are otherwise healthy, however, you should enjoy, with no guilt or fear, the recharging benefits provided by a short nap (about 20 to 45 minutes) when the need arises or as a regular sleep habit.

## Is it age or a sleep disorder?

Certain conditions that affect our sleep or occur while we sleep are called “sleep disorders”. It has been well established that older individuals have a higher proportion of sleep disorders compared to young adults linked to aging or health matters. Nonetheless, solutions do exist and talking about it with a health provider could change your nights and days!

Here is brief list of sleep disorders seen more frequently as we aged:

Sleep disorder	Definition
Sleep apnea syndrome	Repeated pauses in breathing during sleep accompanied by decreases in oxygen saturation and sleep quality
Periodic limb movements	Repetitive movements of limbs, often the legs, that occur while falling asleep (most often) or during sleep; may or may not disrupt sleep
Restless legs syndrome	Overwhelming urge to move the legs, usually caused by uncomfortable or unpleasant sensations in the legs; usually occurs usually when attempting to fall asleep or while resting
REM behavior disorder	Presence of abnormal muscle tone during a period of sleep called REM sleep, resulting in apparent acting out of dream content



Sleep disorders can be symptoms of illness or responses to life events. The interrelationships between health and sleep are very important for older individuals. For example, those newly identified as having a significant illness are more likely to have a new complaint of chronic insomnia within the next few years compared to older individuals who do not have a medical disease. Cardiovascular disease, pulmonary disease, chronic pain conditions, and dementia are all associated with poor sleep quality and/or excessive daytime sleepiness.

Beyond medical conditions, elderly individuals frequently take medications that can affect their sleep and/or suffer from psychiatric disorders whose acute symptoms might contribute to sleep difficulties (e.g., depression and insomnia).

In terms of major life changes and stress, aging can bring with it menopause, retirement, the loss of a loved one, reduced social contact, etc., all of which can impact health and affect when we aged.

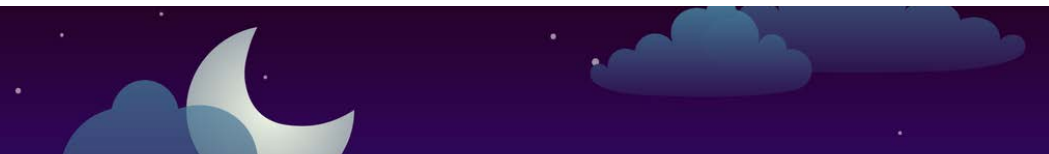
**If you suspect that you have a specific sleep disorder, you should consult your physician or any other healthcare provider who is knowledgeable about sleep. For more information on sleep disorders, you can also consult the sleep and sleep troubles brochures from the Canadian Sleep Society (CSS).**



## Menopause and sleep

If you have ever discussed menopause with your friends, you may have realized that there are as many menopause experiences as there are women. For most women, this natural transition is a smooth one with not major issues. Even then about half of menopausal women report sleep disturbances. Compared to pre-menopausal women, menopausal women are twice as inclined to use sleeping pills, as some sleep less or have insomnia symptoms.

Very few sleep studies have evaluated the effect of menopause on objective sleep parameters in the laboratory, and the reported results have not yet provided satisfying answers. More studies have investigated how sleep is affected by various menopause-related symptoms, such as night sweats and hot flashes, which often prompt women to seek medical attention. Without a doubt, these menopausal symptoms and associated treatments seem to play a role in whether or not women are satisfied with their sleep. However, we still don't know how these symptoms and treatments impact the recuperative function of sleep.



### Sources:

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## **About Canadian Sleep Society**

<https://scs-css.ca/>

The Canadian Sleep Society is a national organization committed to improving sleep for all Canadians through: support for research, promotion of high quality clinical care, education of professionals and the public, and advocacy for sleep and sleep disorders medicine  
Promoting Healthy sleep for healthy Canadians.

## **About Canadian Sleep and Circadian Network**

<https://www.cscnweb.ca/about-cscn>

The Canadian Sleep and Circadian Network (CSCN) is national in scope and is committed to scientific excellence in the generation of new knowledge and its translation. We look to better understand sleep disruption and its impact so we can foster healthier sleep and healthier Canada

## **About Immerscience**

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