Context Clues: Using Social Determinants of Health (SDOH) to Enhance Treatment: Sleep

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Learning Objectives

This presentation provides an orientation to sleep as a Social Determinant of Health. You will:

- Learn how sleep is related to physical and mental health
- Learn how to assess for sleep problems
- Learn how to make referrals to support for sleep problems

What do we need to know about sleep

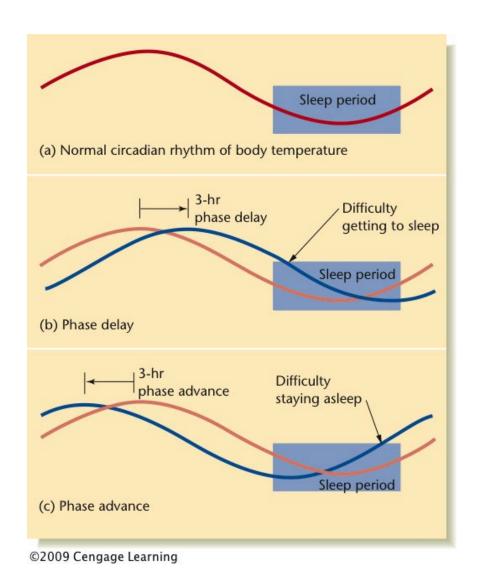


Waking and Sleeping Rhythms

Sleeping and waking are regulated by internal mechanisms that operate on an approximately 24 hour cycle.

- Individual differences to the rhythm of wakefulness and alertness.
- The sleep cycle is associated with age.
- The 24-hour cycle is called the "Circadian rhythm" and it remains consistent throughout the day; even without external stimuli.
- It is possible to adjust to 23- or 25- hour day, but not to a 22- or 28hour day.
- People who engage in shift work often fail to adjust completely.

(Cengage Learning, 2008)



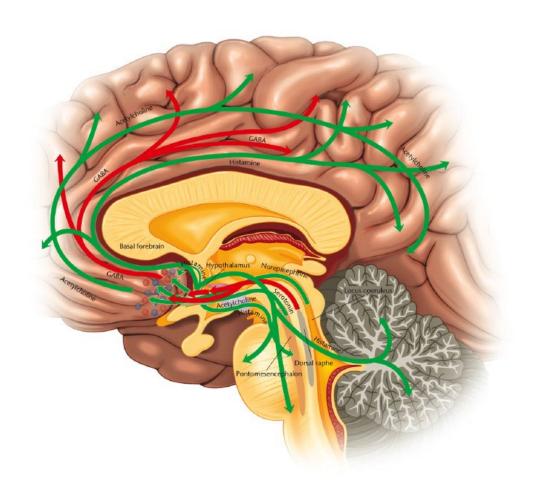
How to adjust (restore) the circadian rhythm

- Free-running rhythm is when no stimuli resets it.
- A zeitgeber is a term used to describe any stimuli that affect the circadian rhythms.
- Light is important. Can buy lights to help with that. Other sleep altering stimuli include exercise, noise, meals, and temperature.

Mechanisms of the Biological Clock (Circadian Rhythm)

• Light stimulate melatonin production in the pineal gland.

- Brain mechanisms of sleeping and waking
 - Excitatory connections
 - Histamine, Acetylcholine, Norepinephrine
 - "Histamine" produce widespread excitatory effects throughout the brain.
 - Anti-histamines produce sleepiness.
 - Inhibitory connections
 - Serotonin
 - GABA decrease the temperature and metabolic rate and decrease stimulation of neurons.



Why do we sleep?

Conserving energy

- The original function of sleep was to probably conserve energy.
- Conservation of energy is accomplished via:
 - Decrease in body temperature of about 1-2 Celsius degrees.
 - Decrease in muscle activity.

(Cengage Learning, 2008)

Sleep restores the brain

- The brain changes when we sleep and removes waste from the system. I.e. some toxins associated with Alzheimer's disease is removed during sleep at twice the rate as when awake
- Proteins rebuilt in the brain
- Energy supplies replenished

(NIH, 2021)

Why do we sleep?

Helps us form memories

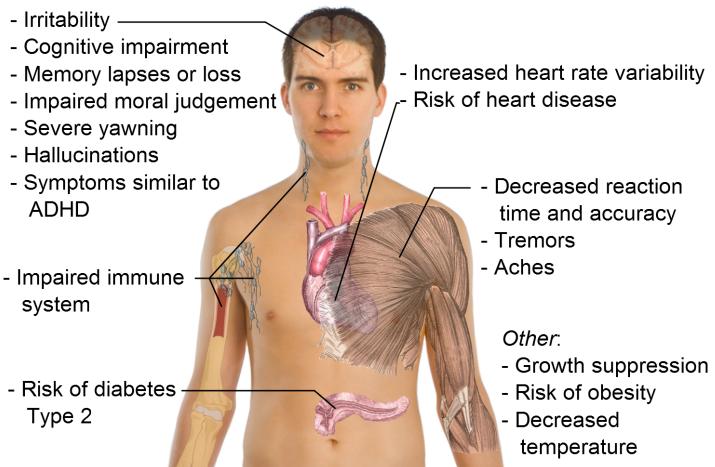
- Sleep is important for learning and memory.
- We all function better after a good night's sleep.
- Increased brain activity occurs in the area of the brain activated by a newly learned task while one is asleep.
- Activity also correlates with improvement in activity seen the following day.

Dreaming

We process emotions in our sleep

Sleep Deprivation

Sleep deprivation



Stages of Sleep

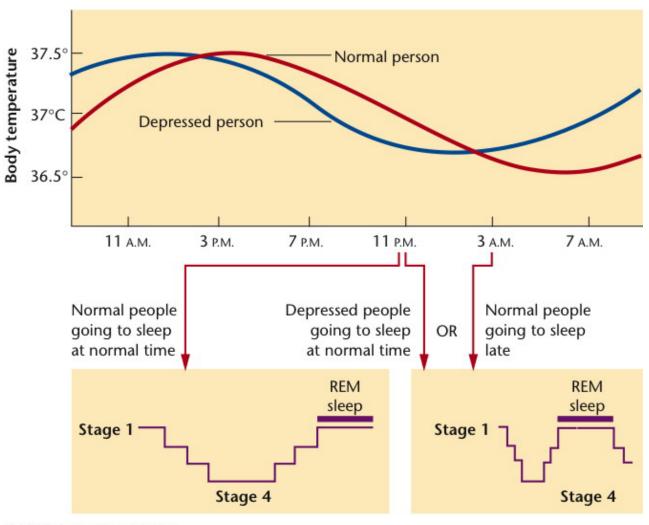
Stage 1 non-REM sleep is the changeover from Stage 3 non-REM sleep is the period of deep wakefulness to sleep. During this period of relatively light sleep, your heartbeat, breathing, and eye movements slow, and your muscles relax with occasional twitches. Your brain waves begin to slow.

Stage 2 non-REM sleep is a period of light sleep before you enter deeper sleep. Your heartbeat and breathing slow, and muscles relax even further. Your body temperature drops and eye movements stop. Brain wave activity slows.

sleep that you need to feel refreshed in the morning. Your heartbeat and breathing slow to their lowest levels during sleep. Your muscles relax and it may be difficult to awaken you. Brain waves become even slower.

REM sleep first occurs about 90 minutes after falling asleep. Your eyes move rapidly from side to side behind closed eyelids. Your breathing becomes faster and irregular, and your heart rate and blood pressure increase to near waking levels. Most of your dreaming occurs during REM sleep. Your arm and leg muscles become temporarily paralyzed, which prevents you from acting out your dreams. As you age, you sleep less of your time in REM sleep.

Altered Sleep Patterns and Depression



Seasonal Affective Disorder and Sleep

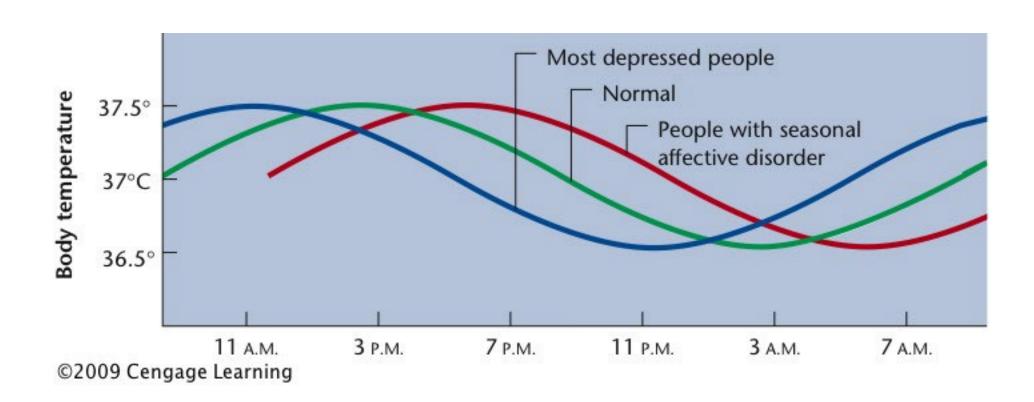
Seasonal affective disorder (SAD) develops during seasons with decreased sun exposure.

Exposure to bright lights in the morning is helpful.

Serotonin levels are affected by light.

Include phase-delayed sleep and temperature rhythms; contrary to most depressed people that have phase-advanced patterns.

Seasonal Affective Disorder and Sleep



Work Stress/Burnout & Health

1

Sleep is important for physical heath and wellness

Sleep restores protein levels in the brain, helps us form memories and increase learning, and helps us process emotions. 2

Sleep problems/disorders are associated with health outcomes

Sleep problems/disorders are problems by themselves. And, they determine health outcomes.

3

Insufficient sleep affects our physical health

Sleep is associated with diabetes, impaired immune system, heart disease and many other physical symptoms.

4

Insufficient sleep affects our mental health

Is associated with depression, seasonal affective disorder, hallucinations, ADHD, and cognitive functions. 5

Sleep is regulated by light

Light is the most important "zeitgeber". It helps us reset the biological clock everyday



How to assess for sleep problems

Sleep Disorders, examples

There are 10 sleep disorders in DSM-5

Insomnia A disorder associated with inadequate sleep.

Sleep Apnea A disorder of inability to breathe while sleeping

for a prolonged period of time.

Narcolepsy A disorder of frequent periods of sleepiness

throughout the day.

Nightmare Intense anxiety awakens a person screaming in

terror.

Z72 Problem Related to Lifestyle Sleep Z-Codes

Z72.820 Sleep deprivation

Z72.821 Inadequate sleep hygiene

Sleep Hygiene

Set a schedule – go to bed and wake up at the same time each day.

Exercise 20 to 30 minutes a day but no later than a few hours before going to bed.

Avoid caffeine and nicotine late in the day and alcoholic drinks before bed.

Relax before bed – try a warm bath, reading, or another relaxing routine.

Create a room for sleep – avoid bright lights and loud sounds, keep the room at a comfortable temperature, and don't watch TV or have a computer in your bedroom.

Don't lie in bed awake. If you can't get to sleep, do something else, like reading or listening to music, until you feel tired.

See a doctor if you have a problem sleeping or if you feel unusually tired during the day. Most sleep disorders can be treated effectively.

NIH (2022)

Pittsburg Sleep Quality Index

- Assess subjective sleep quality and sleep habits during the last month
- 19 items and 5 additional items that are completed by bedpartner

- Internal consistency: Cronbach $\alpha = 0.73$.
- Test-retest reliability = 0.859

What to do about sleep in primary care

ASK

 Ask about sleep. Dig into how patients are doing sleepwise. Are they having difficulties falling asleep, do they wake up early, tired during the day, wake up screaming, etc.

IDENTIFY

Find local resources for therapy and counseling.

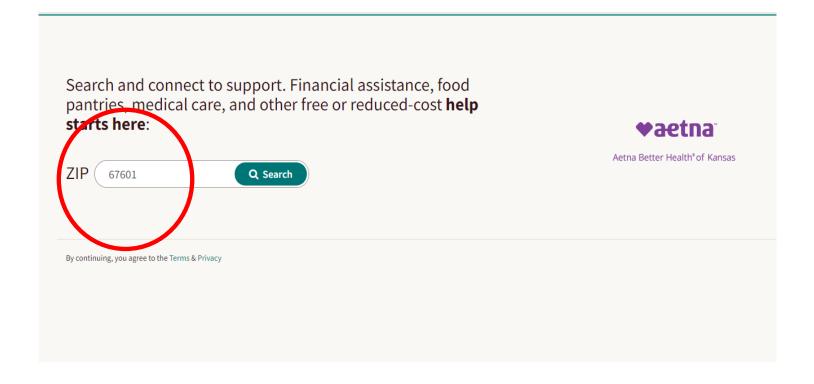
ACT

• Identify patients via Z-Codes and increase their motivation to seek help for sleep. Provide education about sleep cycle, melatonin, and light and other "zeitgebers". Make referrals.

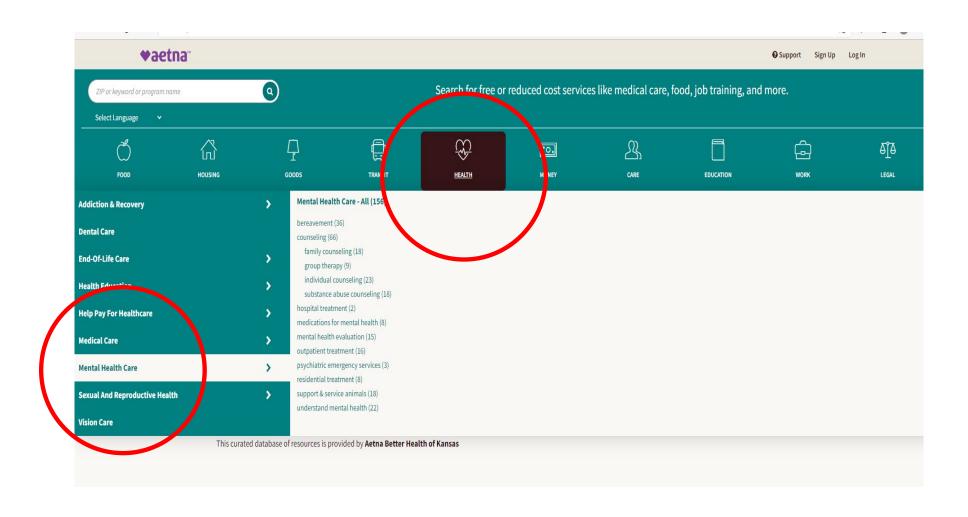
Referrals



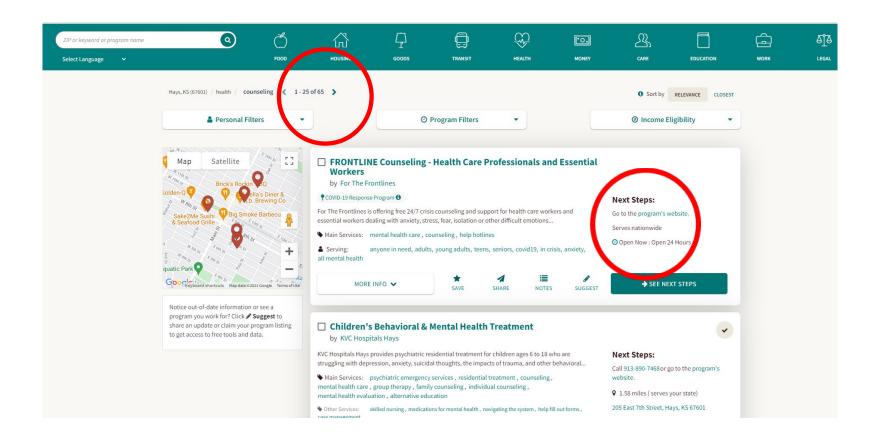
Aunt Bertha - https://aetna-ks.auntbertha.com



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Practice Application

"Our Case Study"



What can we learn from our case study?

Claudia



Mother Age: 38

Race: Latina

Employment: Waitress

Insurance: through employer

Patrick

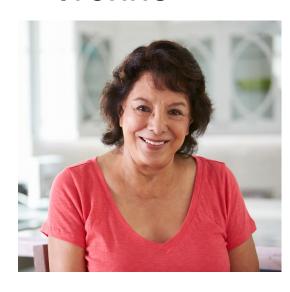


Father Age: 41

Race: White/Thai

Employment: Auto detailer Insurance: marketplace plan

Ivonne



Grandmother

Age: 63

Race: Latina

Employment: N/A Insurance: none

What can we learn from our case study?

Tyler



Eldest daughter

Age: 16

Race: biracial

Employment: student Insurance: Medicaid

Elliot



Son

Age: 13

Race: Latino

Employment: student Insurance: Medicaid

Edith



Youngest daughter

Age: 2

Race: biracial

Employment: N/A

Insurance: Medicaid

Questions?



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