

Patients with cancer should be screened at regular intervals for sleep disturbances. Initial screening questions are:

- Do you have problems with your sleep on average for 3 or more nights per week?
- Does the problem with your sleep affect your daytime functioning?

If the answer to both of these questions is yes a more focused assessment of sleep disturbance is indicated. (Howell et al., 2014). Several assessment tools are available. Patients with intermediate or high risk of sleep disorders should be referred for specialized sleep assessment and interventions.

Insomnia is the most common disturbance. Standard Cognitive Behavioral Therapy for chronic Insomnia (CBTI) is provided by trained sleep specialists. Nurses can use many CBTI principles for acute disturbances by teaching patients the following healthy sleep behaviors:

- Go to bed only when sleepy and approximately the same time each night.
- Leave the bedroom if unable to fall asleep or fall back to sleep after awakening; relax in a dark, quiet, and comfortable place and return to bed only when sleepy.
- Maintain a regular rising time each day, even on weekends or non-work days.
- Use the bedroom for sleep and sex only (avoid work and non-sleep related activities).
- Avoid daytime napping. If needed, limit to one nap (20-30 minutes) and spend at least four hours awake before bedtime.
- Create a soothing bedtime routine. Start by winding down 1-2 hours before bedtime. Use a preferred relaxation technique, such as a warm bath or shower, reading, listening to soft music, meditation, or muscle relaxation.
- Set aside a daytime “worry time” to avoid upsetting thoughts near bedtime.
- Restrict caffeine after noon, and avoid nicotine, alcohol, heavy or spicy meals too close to bedtime; do not go to bed hungry (a protein snack is preferred).
- Create a comfortable sleep environment. Replace mattress every 10-12 years and pillows more frequently; keep the bedroom dark, cool, and quiet; avoid light-emitting electronics and television in the bedroom.
- Increase exposure to bright natural light (at least 20 minutes daily) preferably in the morning.
- For more info, visit National Sleep Foundation: <http://www.sleepfoundation.org> or National Cancer Institute Physician Data Query Sleep Disorders: [https://www.cancer.gov/about-cancer/treatment/side-effects/sleep-disorders-hp-pdq#section/\\_1](https://www.cancer.gov/about-cancer/treatment/side-effects/sleep-disorders-hp-pdq#section/_1)

If follow up assessment (suggested in 6-8 weeks) does not show improvement, and the patient continues to have clinically relevant sleep disturbance, referral to primary care or a specialist for further intervention is indicated.

*Howell, D., Oliver, T.K., Keller-Olaman, S....Taylor, C. (2014) Sleep disturbance in adults with cancer: a systematic review of evidence for best practices in assessment and management for clinical practice. Annals of Oncology 25., 791-800. Doi:10.1093/annonc/mdt506.*