Idiopathic Insomnia

Those with Idiopathic Insomnia (also called Childhood Onset Insomnia) cannot think of a time when they could sleep well, even as children. Their history of poor sleep is lifelong and relentless.

Idiopathic Insomnia: a rare, lifelong inability to obtain adequate sleep that is presumably due to an abnormality in the neurological control of the sleep-wake system.

Features

For some people, Idiopathic Insomnia seems to be present at birth. At the latest, it appears sometime during childhood. Once present, it never goes away.

This disorder is a primary form of insomnia. It therefore does not develop as the result of a medical or psychiatric problem. Nor is it associated with another chronic sleep problem. It is not even due to life stress, although life stress can make it worse.

Despite the lack of additional health problems, a night’s rest is extremely difficult for a person with Idiopathic Insomnia to manage. The amount of time spent sleeping is very short. It is difficult to fall and stay asleep no matter how positive the sleeping conditions. Numerous awakenings throughout the night are also common. These symptoms of insomnia persist nearly every night.

>Idiopathic vs. Psychophysiological. Both problems involve a chronic complaint of insomnia. The difference is that Idiopathic Insomnia is not a learned behavior that is precipitated by stress.

Diagnosis

A sleep disorders evaluation may not be necessary, if the chronic lack of sleep does not interfere with functioning well during the day. Because Idiopathic Insomnia is experienced from birth or early childhood, many people learn how to adapt. If daytime tiredness, attention problems, or other symptoms of sleep deprivation become a problem, then it may be helpful to seek the advice of a doctor or sleep specialist.

Your family history, lifelong history of insomnia and a two week sleep diary will help diagnose this condition. The log should reflect: bedtime, the time it takes to fall asleep, the number and duration of awakenings during the night, and the time you arise from sleep.

An overnight sleep study may be necessary if another sleep disorder is suspected. The test, called a polysomnogram, records brainwaves, muscular activity and breathing during the course of a night’s sleep.

Treatment

Idiopathic Insomnia incorporates some of the same treatments as other forms of insomnia:

Good Sleep Hygiene undermines poor sleep habits, which can aggravate persistent insomnia.

Cognitive Behavioral Therapy (CBT): any number of psychotherapies designed to improve the likelihood of sleep. This includes:
  >Stimulus Control trains the mind to go to bed only when tired to avoid developing an association between the bedroom and wakefulness.
  >Sleep Restriction Therapy reduces the number of hours in bed until sleeping there is unmistakeable.
  >Medication: in some cases may improve the process of sleep. Commonly used prescription medications include: Zolpidem (Ambien), Eszopiclone (Lunesta), and Trazadone (Desyrel).

Do I have Idiopathic Insomnia?

I have trouble falling asleep.
I have trouble staying asleep.

I cannot sleep despite healthy sleep habits and enough time for it.

My insomnia began in infancy or childhood and has persisted since then.

There is no other cause for my insomnia, such as another sleep disorder, a medical or psychiatric problem, or the use of medication or recreational drugs.
**Did You Know?**

Laval in Quebec, Canada found that nearly 35% of people with insomnia have a first degree relative with the disorder.

**Idiopathic Insomnia Mechanics**

It is not known exactly why some people seem to be born with lifelong, relentless insomnia. Some theories suggest that there is a dysfunction in how the brain manages sleep.

Under normal conditions, **sleep** and **wakefulness** occur naturally. To achieve this, certain areas of the brain take on the task of keeping us awake, while other areas dominate during sleep. The “sleep system” of a person with Idiopathic Insomnia may be under-active, or the “waking system” may be overactive.

**Risks for Idiopathic Insomnia**

- Family history of insomnia (at least one first degree relative with a history of insomnia)

**Effects of Idiopathic Insomnia**

- Depression
- Anxiety
- Moodiness
- Irritability
- Lack of Concentration
- Poor Job Performance

**Need more information?**

Visit the SleepMedicine Education website at: sleepmedicineeducation.com for additional publications. See also:

**SleepIssues**: “Can’t Sleep?”

**SleepGuides**: “Treating Sleep Disorders”

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