



Trouble sleeping?

Don't assume it's a normal part of aging

Good sleep can help maintain optimal health, but for many older adults getting enough restful sleep can be a challenge. Poor sleep has been linked to depression, memory difficulties, and an increased risk of falls and accidents. The University of Michigan National Poll on Healthy Aging asked a national sample of adults age 65-80 about their sleep patterns, use of sleep medications, and whether they discussed sleep-related concerns with their doctor.

In a typical week, nearly half of older adults (46%) reported that they regularly have trouble falling asleep: 32% on 1-2 nights a week and 15% on three or more nights. Older adults who described their health as fair or poor were more likely to report trouble falling asleep.

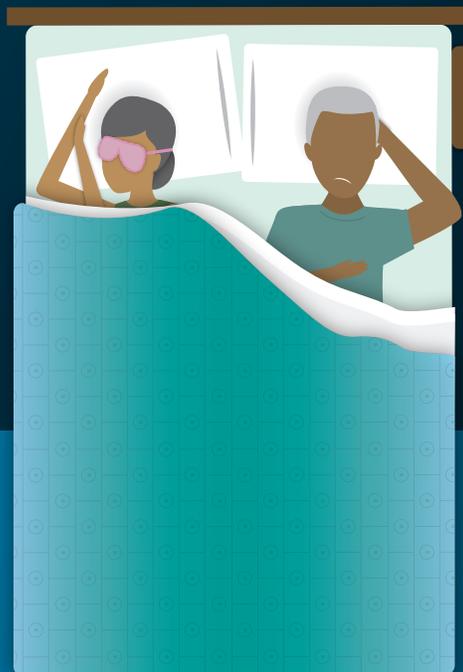
Having to use the bathroom (50%), worry/stress (25%), and pain (23%) were among the common reasons cited for trouble sleeping. But 41% said they were not sure why that had trouble sleeping.

Over a third of older adults (36%) reported using some type of medication to help with sleep including prescription sleep medications, over-the-counter (OTC) medications promoted as night-time formulations, herbal/natural sleep aids (like melatonin) or prescription pain medications. Use of a least one of these medications was reported by 14% of older adults for regular use and 23% for occasional use.

Among older adults having trouble falling asleep on three or more nights a week, 60% used some type of medication to help with sleep either regularly (31%) or on occasion (29%).



Trouble Falling Asleep in a Typical Week Among Adults Age 65-80 (nights/week)



32%
on 1-2 nights

15%
on 3+ nights

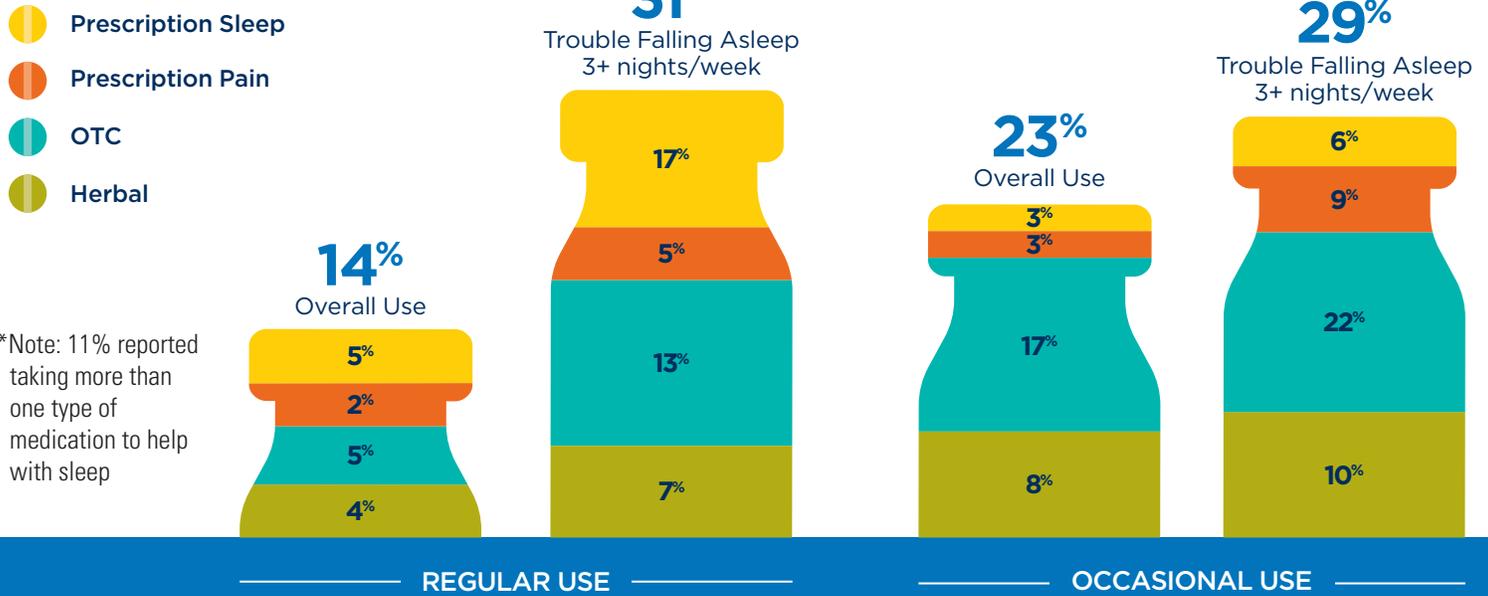
Sponsored by



Directed by



Use of Sleep Medications Among Adults Age 65–80



*Note: 11% reported taking more than one type of medication to help with sleep

Use of Medications to Help with Sleep

Prescription sleep medication - 5% of older adults reported regular use of these medications and another 3% had occasional use.

Prescription pain medications - 5% of older adults reported either regular or occasional use of these medications to help with sleep.

OTC medications - 5% indicated regular use and 17% reported occasional use.

Herbal/natural sleep aids - 4% had regular use of these aids, another 8% said they used these aids occasionally.

Among older adults having trouble falling asleep on 3 or more nights a week, regular use of medication to help with sleep was higher; 17% used prescription sleep medicines, 5% prescription pain medication, 13% OTC medicines, and 7% herbal/natural aids regularly.

Occasional use of medications to help with sleep was also higher for older adults who reported trouble falling asleep on 3 or more nights a week; 6% used prescription sleep medicines, 9% prescription pain medication, 22% OTC medicines, and 10% herbal/natural aids occasionally.

Among older adults taking prescription sleep medications, the majority (62%) reported long-term use of more than 3 years.

Is Sleep a Health Problem?

More than half of older adults (54%) believed poor sleep is a normal part of aging. Overall, 29% of older adults described their own sleep as somewhat of a problem while 7% said their sleep was a great deal of a problem.

Among older adults reporting trouble falling asleep on three or more nights a week, 65% said that poor sleep is a normal part of aging and 40% described their health as fair or poor.

Talking to a Doctor About Sleep

Overall, one in four respondents (26%) had discussed ways to improve sleep with their doctor. About half of older adults (55%) who reported trouble falling asleep on three or more nights per week and 69% of those who reported their sleep was a great deal of a problem had spoken with their doctor.

For older adults who did talk about sleep, 62% said the doctor provided helpful advice, another 31% got advice that was not helpful, and 7% said their doctor did not give any advice.

Why haven't older adults discussed ways to improve sleep with their doctor? The most common reasons cited were not thinking of sleep as a health issue (34%), having other concerns to discuss (31%), not remembering to ask (21%), and not thinking the doctor could help (17%).

Implications

Although sleep patterns can change with age (e.g., going to bed earlier, waking up earlier), poor sleep is not a normal part of aging. Poor sleep can negatively affect overall health and quality of life. At times, sleep problems may signal a more serious health issue.

More than half of respondents to this National Poll on Healthy Aging believed that poor sleep is a normal part of aging. This is reflected in the small proportion of older adults who reported talking to their doctors about how to improve their sleep. In fact, the most common reason cited for not discussing these concerns was not thinking of sleep as a health issue.

Among adults 65–80 using prescription sleep medications,

29% report using them for 1–3 years

62% report using them for more than 3 years

Research has shown that extended use of medications for sleep (either prescription or OTC) can be detrimental to health. Among other adverse effects, long-term use of these medications can impair memory and increase the risk of falls.

Among poll respondents who reported taking prescription sleep medications, the majority had been taking these for three or more years. With 5% of respondents reporting regular use of prescription sleep medications, the overall number of older adults at risk of adverse effects is large.

A similar number of older adults reported use of prescription pain medications to help with sleep. This is notable at a time when the general topic of opioid misuse is receiving increased

attention. This presents an opportunity for doctors and pharmacists to educate patients about these medications and explore new ways to reduce prolonged use and potential dangers.

Poll results also show nearly one in four older adults use OTC sleep medications either regularly or on occasion. Like prescription medications, OTC drugs can have serious side effects that present health and safety concerns. These medications usually contain antihistamines like diphenhydramine. Besides confusion, other common side effects include urinary retention and constipation.

There is a false perception among many people that medications available without a prescription must be safe. Although educational campaigns directed toward older adults have helped raise awareness of these safety concerns, the current results suggest there is still substantial OTC use and thus potential for serious adverse effects.

In addition, use of herbal/natural sleep aids was reported by one in eight older adults. Herbal sleep aids are often assumed to be safe because they are made with natural ingredients, but drug interactions and side effects can occur with these products.

Sleep is an important health issue and older adults are encouraged to talk to their doctors about sleep-related concerns. When poll respondents spoke to their doctor, they usually received helpful advice. General advice may include limiting fluids and electronic media before bedtime. Relaxation methods and interventions to address stress and anxiety are sometimes recommended as well.

Doctors should also remember to ask older adults about sleep-related concerns and about use of medications to help with sleep.

Data Source and Methods

This National Poll on Healthy Aging report presents findings from a nationally representative household survey conducted exclusively by GfK Custom Research, LLC (GfK), for the University of Michigan's Institute for Healthcare Policy and Innovation. National Poll on Healthy Aging surveys are conducted using GfK's KnowledgePanel®, the largest national, probability-based panel in the U.S. Surveys are fielded two to three times a year with a sample of approximately 2,000 KnowledgePanel® members age 50–80.

This survey was administered online in April 2017 to a randomly selected, stratified group of older adults age 50–80 (n=2,131). Respondents were selected from GfK's web-enabled KnowledgePanel® that closely resembles the U.S. population. The sample was subsequently weighted to reflect population figures from the Census Bureau.

This report is based on responses from 1,065 respondents age 65–80. The completion rate was 80% among panel members contacted to participate. The margin of error is ±1 to 3 percentage points and higher among subgroups.

Findings from the National Poll on Healthy Aging do not represent the opinions of the University of Michigan. The University of Michigan reserves all rights over this material.

For more information or to receive future reports, visit healthyagingpoll.org

National Poll on Healthy Aging Team

Preeti Malani, MD, MSJ, MS
Director

Sarah Clark, MPH
Associate Director

Erica Solway, PhD, MPH, MSW
Associate Director

Dianne Singer, MPH
Production Manager

Matthias Kirch, MS
Data Analyst

The Regents of the University of Michigan

Michael J. Behm, Grand Blanc
Mark J. Bernstein, Ann Arbor
Shauna Ryder Diggs, Grosse Pointe
Denise Ilitch, Bingham Farms
Andrea Fischer Newman, Ann Arbor
Andrew C. Richner, Grosse Pointe Park
Ron Weiser, Ann Arbor
Katherine E. White, Ann Arbor
Mark S. Schlissel (*ex officio*)

The University of Michigan is a Non-discriminatory, Affirmative Action Employer.

© 2017, The Regents of the University of Michigan

Sleep Issues Among Adults Age 65–80 (N= 1,065): Supplemental Data

Self-reported Health Status According to Number of Nights with Trouble Falling Asleep*

| Health status | Trouble Falling Asleep | | |
|---------------------------------|------------------------|------------|------------|
| | 0 nights | 1–2 nights | 3–7 nights |
| Excellent/ Very Good | 48% | 35% | 18% |
| Good | 34% | 45% | 42% |
| Fair/Poor | 18% | 20% | 40% |

*In a typical week

Margin of error ±9

Use of Any Sleep Medication According to Number of Nights with Trouble Falling Asleep*

| Use of any sleep medications or sleep aids | Trouble Falling Asleep | | |
|--|------------------------|------------|------------|
| | 0 nights | 1–2 nights | 3–7 nights |
| Regularly | 8% | 15% | 31% |
| Occasionally | 16% | 30% | 29% |
| Do not use | 76% | 55% | 41% |

*In a typical week

Margin of error ±9

Talked with Doctor According to Number of Nights with Trouble Falling Asleep*

| Talked with doctor | Trouble Falling Asleep | | |
|--------------------|------------------------|------------|------------|
| | 0 nights | 1–2 nights | 3–7 nights |
| Yes | 14% | 32% | 55% |
| No | 86% | 68% | 45% |

*In a typical week

Margin of error ±13

Talked with Doctor According to How Much Sleep is a Problem

| Talked with doctor | How much sleep is a problem | | |
|--------------------|-----------------------------|------|--------------|
| | Little or not at all | Some | A great deal |
| Yes | 14% | 42% | 69% |
| No | 86% | 58% | 31% |

Margin of error ±9