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Insomnia

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The Importance of Sleep
A good sleep makes you feel rejuvenated and spirited. It also helps restore your biological function and enhance your immunity against diseases. Even if you prefer to be active, busy and productive, make sure you leave enough time to allow your mind and body to rest and get a good night’s sleep. Good sleep is greatly rewarding, and will do your brain and body a lot of good.

Chronic insomnia may adversely affect your personal life, physical and psychological well-being.

What is Insomnia?
Insomnia can be classified as:
1. Sleep-onset insomnia, i.e. failure to fall asleep after more than 2 hours in bed
2. Nocturnal awakening, i.e. difficulty in getting back to sleep after waking up in the middle of the night
3. Poor-quality sleep, i.e. failure to sleep well, feeling tired and unrefreshed upon waking up

According to the American Academy of Sleep Medicine 2005 and the fourth edition of the Diagnostic and Statistical Manual of Mental Disorders, insomnia is defined with the following criteria:
1. Poor sleep quality (a subjective perception)
2. Persistent difficulty in falling asleep and in maintaining sleep
3. Difficulty in sleeping for 3 nights or more in a week
4. Sleeping problems lasting over 6 months
5. Distress due to insomnia
6. Adverse impact on work, study, social life, etc.

How Common is Insomnia?
There are numerous studies conducted on insomnia in the US and the UK. Despite discrepant findings, all studies point to the same conclusion that one third of the population may be suffering from insomnia. The prevalence of insomnia in Hong Kong may look mild by comparison, yet recent studies showed that insomnia should not be taken lightly. According to a large-scale study conducted by The Chinese University of Hong Kong in 2002, 12 in 100 locals suffered from long-term insomnia. Another study conducted by the Department of Health in 2008 indicated that about one fifth of 2,000 respondents had poor sleep about two to three times a week in the month prior to the interview. A collaborative study on the epidemiology of insomnia was conducted by The University of Hong Kong and The City University of Hong Kong, which showed that on average 40% of the population had sleeping problems at least once a week over the past month.

Nature of Sleep
Muscles relax and brain activity slows down during sleep. Rates of respiration and heartbeat decrease, and body temperature drops. Reduced brain activity brings about changes in brain wave patterns, whose frequency, as demonstrated by electroencephalography, varies with the depth and stage of sleep. Brain wave pattern changes from alpha to theta, with emergence of sleep spindles and K-complexes as sleep deepens. With delta pattern, one is soundly asleep and all physiological activities, e.g. respiration, heartbeat, oxygen consumption, blood pressure, etc. will reach its lowest level. During this stage, one may become indifferent to the surroundings. In the terminology of somnology, this is referred to as Non-Rapid Eye Movement (NREM) sleep. In contrast, short periods of Rapid Eye Movement (REM) sleep, or the dreaming stage, will emerge in between NREM sleep during which one’s brain becomes active with increased heartbeat and oxygen consumption.
Causes of Insomnia

Sleep quality is related to the following factors:

1. Poor daily habits
   - Diet: Eating too much or starving, consuming caffeinated beverages (such as coffee, tea and soft drink) or alcohol, smoking
   - Exercise: Strenuous exercise before sleep may lead to delays in falling asleep
   - Medication: Use of steroids, pseudoephedrine, etc.

2. Environmental factors
   General comfort level, which is influenced by noise at home, room lighting, temperature, suitability of mattress, etc.

3. Stresses
   Daily life hassles: Short-term insomnia arises when a person is under pressure from changes in life, e.g. life events such as marriage, moving home, job change as well as transitions in interpersonal relationships. Insomnia should subside as soon as such changes and worries are resolved.

4. Physical discomfort or diseases
   - Endocrine disorder, e.g. Thyrotoxicosis
   - Cardiac problems such as Congestive Heart Failure, Arrhythmia
   - Sleep disorders, e.g. Sleep Apnoea
   - Menopause

   Physical symptoms include:
   - Itchiness
   - Tinnitus
   - Nocturia, e.g. Prostatism
   - Musculoskeletal pain
   - Nocturnal cough, e.g. Asthma, Bronchial Hypersensitivity
   - Nasal obstruction or Post-Nasal Drip Syndrome in people with allergy
   - Nocturnal leg cramp

5. Emotional disorders
   - Anxiety disorder (including Generalized Anxiety Disorder, Obsessive-Compulsive Disorder, Panic Disorder, Post-Traumatic Stress Disorder, etc.)
   - Depression (including Major Depression, Bipolar Disorder, etc.)

6. Unreasonable expectation or belief about sleep
   Short-term insomnia may become chronic if not handled properly, e.g. you may become obsessed about sleep, take frequent naps due to daytime tiredness, go to bed too early, feel tense and panicky about sleeplessness or not having a good night’s sleep. Chronic worries may render you less able to fall asleep.

   In serious cases one may become “hypnophobic”, which means being obsessed with and feeling panicky about whether one is indeed asleep throughout the night, or entertaining unrealistic thoughts about sleeping such as “I must sleep for 8 hours, or I will not be able to handle the job tomorrow” or “I will get really sick or even crazy if I cannot sleep well tonight”. Anxiety and tension may further lead to physical symptoms which interfere with your sleep, leading to long-term insomnia or other emotional problems that can adversely affect your daily life.
Healthy Sleeping Habits

- Maintain regular waking hours every day
- No naps during the day
- Relax before sleep. You may drink hot milk or take a hot bath before going to bed
- Do not force yourself into sleep while lying in bed. Take it easy and let sleep come naturally. Try not to check the time, or you may feel more tense and awake
- If you have been awake in bed for more than 30 minutes, get off the bed. Return to bed only when you feel sleepy
- Try not to do anything other than sleep in bed, e.g. reading, watching TV, etc. Such activities may weaken the association between sleep and your bed
- Do not fear insomnia. The more panicky you are and the more active your brain is, the harder it will be for you to fall asleep

When Should I Consult a Doctor?

If you are having difficulty sleeping, and you feel drained or that your daily activities are being adversely affected, you should consult your family physician. Your family physician will conduct a preliminary examination to see if further assessment is required. Your family physician may also advise you if your condition may be helped by pharmacological and/or psychological treatments.

Our Service

Together with the Clinical Health Psychology Centre, the Family Medicine and Primary Care Centre offers professional, appropriate and comprehensive sleep assessment and treatment to patients with insomnia. An individually tailored and integrated evaluation will be conducted including assessments of both physical and psychosocial conditions of the patient. Treatments ranging from pharmacological to non-pharmacological, and clinical psychology services may be provided if necessary.

Compiled by
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失眠

查詢或預約，歡迎聯絡我們

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睡眠的重要性

睡眠讓我們得以休息，恢復體力，並有助生理機能復原，維持身體的免疫力。所以不論您要做多少事情，亦必須作息定時，容許自己甚麼也不做、甚麼也不想地好好睡一覺，讓身體和腦袋好好休息一下。

然而，一旦受失眠困擾，個人生活及精神狀態或多或少會受到影響，甚至引發心理及生理症狀，後果不容忽視。

何謂失眠？

失眠大致可分為三大類：

1. 在床上輾轉反側超過兩小時方能入睡，屬「入睡困難失眠」
2. 半夜醒來無法入睡，屬「持續困難失眠」
3. 整晚不能熟睡，醒後仍覺精神欠佳，疲憊不堪，屬「低質素睡眠」

綜合美國睡眠醫學學院（2005）與美國精神疾病診斷與統計手冊第四版的界定，失眠包括以下各項：

1. 主觀感覺睡眠質素欠佳
2. 長期難以入睡或維持睡眠狀態
3. 一星期內有三晚或以上難以入睡
4. 睡眠問題持續超過六個月
5. 患者因失眠感到困擾
6. 妨礙日常生活，如工作、學習、社交等

失眠的本質

當我們睡覺時，身體肌肉會漸漸放鬆，思想活動會漸漸放緩。呼吸和心跳亦會同樣放慢，體溫徐徐下降。隨著腦部活動放慢，腦電波模式亦會有所改變。根據腦電圖所示，腦電波的活動速度會按熟睡程度，以及睡眠階段而有所不同。一般來說，腦電波會從入睡狀態 (Alpha 腦電波) 轉變成淺睡狀態 (Theta 腦電波)，再逐漸出現「軸」和K複合波 (k-complexes)，最後便是相當緩慢的深睡狀態 (Delta 腦電波)，表示已進入熟睡和完全休息的狀態。所有生理活動，如呼吸速度、心跳率、耗氧量和血壓等，屆時都會處於低水平，外界事物和環境都難以騷擾。這些情況按睡眠學而言，屬「非快速眼動」 (NREM) 睡眠。在接著的「快速眼動」 (REM) 睡眠階段裡，我們會進入做夢的狀態，思想活動變得十分頻密，心跳率、耗氧量和大腦活動等亦會大大增加。

失眠有多普遍？

英美有關失眠的研究報告頗多，結果差異亦甚大，惟普遍而言，眾報告大致顯示當地約有逾三成人口有失眠問題。相比之下，港人的失眠情況似乎較為輕微。近期研究如2002年香港中文大學所作之大型調查顯示，每一百名本地市民當中，便有十二人患有長期失眠。此外，衛生署亦於2008年訪問二千名市民，當中有兩成受訪者在訪問前一個月平均每週失眠兩至三次。香港大學和香港城市大學合作的失眠流行病學研究，亦發現近四成港人在一個月內，每星期有一晚或以上出現失眠問題。總而言之，失眠對港人之影響，實在不容忽視。
失眠的成因

一般來說，睡眠質量會受下列因素影響：

1. 日常生活習慣
   - 飲食方面：太飽或太餓、飲用含咖啡因的飲料（如咖啡、茶或汽水）、吸煙或飲酒
   - 運動方面：睡前做劇烈運動，會令人較遲入睡
   - 服藥方面：服用類固醇、偽麻黃鹼等藥物

2. 環境因素
   - 家居的聲浪、睡房的光線和溫度、床褥是否舒適等

3. 生活壓力
   生活上種種不快和煩惱，如人生重要的變遷（結婚、搬家、轉工等），以及工作或人際關係的壓力，都可引致短期失眠。一般來說，煩惱一旦獲得解決，或是逐步適應壓力，失眠問題理應慢慢紓緩。

4. 身體不適或疾病
   - 內分泌疾病，如甲狀腺亢奮
   - 心臟毛病，如阻塞性心臟衰竭、心律不正
   - 睡眠失調（如睡眠窒息症）
   - 更年期

生理病徵包括：
   - 痙癢
   - 耳鳴
   - 夜尿，如前列腺慢性病

5. 情緒病
   - 焦慮症（包括廣泛焦慮症、強迫症、驚恐症、創傷後壓力症等）
   - 憂鬱症（包括躁鬱症）

6. 對睡眠抱不切實際想法或期望
   有些時候，如對短暫睡眠問題處理不當，或會令情況不必要地持續下去。如過份執著於補充睡眠時間而午間小睡；又或晚上過早上床，卻太擔心失眠或睡得不好；為可能引起的問題而感到焦慮，最終只會令自己身心過份拉緊，成為入睡的絆腳石。

如情況嚴重，患者可能會出現睡眠恐慌症，整晚惶然地注意自己是否已經入睡，又或抱有一些不設實際的想法，如「我一定要有八小時睡眠，否則定必應付不了明天的工作」，或「如果今晚仍然睡不好，我就會大病或發瘋」。這樣下去，心理上的緊張狀態，會逐漸改變生理狀態，妨礙正常睡眠，導致長期失眠之餘，更會引起情緒問題，影響工作及生活。
甚麼時候要求醫？
假如您的睡眠問題已持續了好一段日子，令您身心俱疲，日間生活受到影響，您應考慮尋求家庭醫生的協助，先作一個初步的檢查，看看是否有需要作進一步跟進。如有需要，亦可尋求藥物或心理治療。

我們的服務
養和家庭醫學及基層醫療中心和臨床醫療心理學中心攜手合作，致力為失眠人士提供專業、適切及全方位的睡眠評估與治療。服務包括先為病人進行評估，瞭解病人是否出現其他生理病徵，並兼顧病人的社會心理層面、睡眠行為習慣及想法，以作綜合評估，提供全面治療。當中包括藥物治療和非藥物治療，並會因應情況配合臨床醫療心理服務。

良好的睡眠習慣
• 每天定時起床
• 避免日間小睡
• 睡前讓自己安靜下來，做一些有助入睡的睡眠前奏活動，如飲熱牛奶、浸熱水浴等
• 躺在床上時，不用強迫自己入睡，要順其自然；切忌老是看鐘，以免人愈緊張就愈清醒，到頭來更難入睡
• 如已在床逾三十分鐘仍未能入睡，不如下床，待睡意再臨才躺回床上
• 縮短在床上躺著不睡的時間：不宜在床上做太多睡覺以外的事情，如看書、看電視等，減弱床跟睡覺的聯繫訊息
• 不要害怕失眠：焦慮往往會令腦袋更加活躍，愈怕失眠，愈易失眠

家庭醫學及基層醫療中心與臨床醫療心理學中心合撰