Tips for Better Sleep

z^{z^Z} What Is Good Sleep?

- There is **no universal standard** for good sleep.
- Good sleep is the kind that allows you to recover and feel refreshed during the day.
- Consult a healthcare professional if you experience heavy snoring, sleep apnea, nighttime pain, an irresistible urge to move your arms or legs during the night (Restless Legs Syndrome), sleepwalking, or if the measures below prove ineffective.

Rule #1: Regularity

- Keep regular bedtime and wake-up times. The wake-up time naturally determines
 the bedtime. Your body needs to accumulate a certain level of fatigue to initiate
 sleep.
- Limit time shifts and sleep compensation (e.g., sleeping in, long or late naps), even on weekends.

Preparing for Sleep

- Avoid screens close to the eyes (phone, tablet) one hour before bedtime.
- Avoid coffee, tea, caffeine, and nicotine in the 4 to 6 hours before sleeping.
- Limit alcohol in the evening: it may help you fall asleep but disrupts sleep quality.
- Avoid heavy meals before going to bed.
- Engage in a **relaxing activity** at least an hour before bedtime: reading, soft music, breathing exercises, meditation.
- Avoid activities that stimulate the brain: work, social media, video games, intense thinking.
- If you tend to **ruminate**, write down your concerns in a notebook to avoid dwelling on them in bed. **Plan the next day in advance** to clear your mind. If anxiety is significant, do not hesitate to consult a **psychologist**.

I Sleep Environment

- Favor a quiet, dark, and cool room (between 18 and 20°C / 64–68°F).
- Reserve the bed for sleep and intimacy only. No reading, eating, or screen use in bed.
- Disconnect once in bed (no phone, tablet, or computer).
- Avoid checking the time at night (keep the alarm clock out of sight).
- **Reduce noise** (use earplugs if needed) and **block light sources** (e.g., LED indicators from chargers).

Daytime Habits for Better Night Sleep

- Get exposed to natural daylight as much as possible during the day, and limit bright lights in the evening.
- Engage in regular physical activity, but avoid late evening exercise.
- Eat meals at consistent times.



What About Sleeping Pills?

- Avoid if possible. Long-term side effects include addiction, falls, memory problems, and **poor sleep quality**.
- Consider them only as a last resort, for short-term use only, in cases of transient insomnia. Avoid in cases of chronic insomnia.
- Alternatives: herbal teas or supplements with valerian, lemon balm, orange blossom, or chamomile.

Behavioral Method: "Stimulus Control"

- Use the bed only for sleep and intimacy. Do not read, eat, or use screens in bed.
- Go to bed only when sleepy, and only to sleep.
- If you don't fall asleep within 20 minutes, get up, go to another room, and return to bed **only when sleepiness returns**. Repeat as often as needed.
- Wake up at the same time every day, even after a bad night.
- Avoid napping during the day (or take only very brief naps, far from bedtime).
- This method is effective and long-lasting, often as effective as sleeping pills, without the side effects.

Sleep Restriction Technique

To be discussed in advance with a doctor. Suitable in cases of frequent nighttime awakenings or excessive time spent in bed (8–10 hours):

- Set a **fixed wake-up time**, and keep it consistent every day.
- Delay your bedtime on purpose to reduce total time in bed.
- Naps are not allowed.
- Keep a sleep diary (or use a smartwatch).
- Calculate your sleep efficiency = (estimated sleep time ÷ time spent in bed) × 100.
 - o If >85% after 7–10 days: you may advance bedtime by 15 minutes (e.g., from 12:00 a.m. to 11:45 p.m.), while keeping wake-up time fixed.
 - If <80% after 7–10 days: further delay bedtime by 15 minutes (e.g., from 12:00 a.m. to 12:15 a.m.), but never reduce total time in bed below 5 hours.

Menefits:

- Faster sleep onset, fewer nighttime awakenings, better sleep efficiency.
- Total sleep duration gain is modest, and effects on sleep quality remain insufficiently measured.

Possible side effects:

- Daytime sleepiness during the initial phase
- Reduced emotional regulation, fatigue-induced anxiety
- Risk of triggering seizures in individuals with epilepsy

