



# Snooze e-News!

October 9, 2006

## News about the Snooze!

This email contains links to articles related to sleep disorders from various websites. Please note, news websites may withdraw their articles at any time and archive it on their site.

**To learn more about sleep disorders, visit our website [www.sleepservices.net](http://www.sleepservices.net) and click on our educational videos!**

### **Effects of New Sleep Medication Appear Unlikely to Have Potential for Abuse or Cognitive Impairment**

In a study of 14 adults with histories of sedative abuse, the newly approved sleep medication ramelteon does not appear to have effects that indicate potential for abuse or motor or cognitive impairment, according to a report in the October issue of *Archives of General Psychiatry*, one of the *JAMA/Archives* journals. The findings, along with previous clinical trials indicating ramelteon's effectiveness, suggest that it "may fill an unmet need in the treatment of insomnia," the authors write.

"Furthermore, ramelteon may be a safe first-line medication even in individuals not reporting substance abuse, given that some individuals may not admit to such misuse." Future research on sleep medications should explore the effectiveness of other drugs that work on the same pathway as ramelteon, they conclude.

<http://www.newswise.com/p/articles/view/523894/>

### **Study Adds To Links Between Sleep Loss And Diabetes**

In a recent study, researchers found that, on average, the 161 diabetes patients got very little sleep and had poor glucose control. Mean sleep duration was six hours a night. Only six percent reported getting eight hours of sleep on weeknights and only 22 percent reported getting at least seven hours. Seventy-one percent had poor sleep quality. The median HbA1c score was 8.3 percent. Many patients with diabetes have painful complications that can interfere with sleep. Even after the researchers excluded 39 patients who reported such pain, however, two out of three of the remaining 122 patients reported poor quality sleep. The average HbA1c among those patients was almost as high: 8.2 percent. "Our findings suggest, at least in this study population, that short or poor sleep is associated with decreased blood-sugar control in patients who already have diabetes," she said. "The growing tendency to burn the candle at both ends may be a significant contributor to the current epidemic of diabetes. One way to slow down this epidemic may be to avoid building a chronic sleep debt."

<http://www.medicalnewstoday.com/medicalnews.php?newsid=53072>

### **Light Deprivation Hinders Ability To Regulate Sleep-Wake Cycle**

The amount of light exposure can have a profound effect on an individual's sleep pattern. Stronger light intensity enables noradrenergic locus coeruleus (LC) neurons, which regulate arousal, to function normally and, therefore, provide a circadian regulation of the sleep-wake cycle. Light deprivation, on the other hand, induces a loss of noradrenergic fibers which, in turn, throws a person's sleep-wake rhythm out of kilter. The study, conducted by Monica McGonzalez, PhD, and Gary Aston-Jones, PhD, of the University of Pennsylvania, Philadelphia, focused on rats, that were maintained on a light-dark (LD) schedule or in constant darkness (DD) for three to four weeks, and treated with DSP-4, a neurotoxic agent specific for noradrenergic-LC projections. Vigilance states were analyzed before and three weeks after LC lesion. The DSP-4 lesion was verified by immunohistochemistry of noradrenergic fibers in the frontal cortex. "DSP-4 decreased the amplitude of the sleep-wake rhythm in LD animals by significantly decreasing wakefulness and increasing sleep during the active period," the authors wrote. "However, DSP-4 had no effect on the sleep-wake cycle of DD animals. Moreover, DD itself decreased the amplitude of the sleep-wake cycle similar to that of the neurotoxic lesion of the noradrenergic system in LD animals. :

<http://www.medicalnewstoday.com/medicalnews.php?newsid=53343>

### **Consequences of Comorbid Insomnia Symptoms and Sleep-Related Breathing Disorder in Elderly Subjects**

The prevalence of sleep-related breathing disorder (SRBD) and insomnia symptoms increases considerably with advancing age, but little is known about their cooccurrence and their effects on daytime functioning when present together. Because insomnia comorbid with SRBD is associated with the greatest functional impairment, and SRBD is commonly found in the elderly population, health care providers should also consider SRBD in elderly patients with insomnia symptoms.

<http://archinte.ama-assn.org/cgi/content/abstract/166/16/1732>