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# Addiction and sleep

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Anyone who's gone through addiction, or cared for a loved one with addiction, knows firsthand the devastating effects it has on a person's life.

Addiction disrupts all areas of your life, and sleep is no exception.

According to one estimate, individuals with addiction are **5 to 10 times more likely** to have comorbid sleep disorders.

Sleep and addiction are intricately linked. Many people use alcohol or other drugs to help them fall asleep and treat their insomnia, and accidentally become addicted as a result. Even if one didn't have sleep problems before their addiction, long-

term substance abuse physically changes your brain's sleep architecture, disrupting your sleep patterns and sleep quality. Then, just as they come to rely on the addiction substance to function during the day, they also can't sleep without it. Things only get worse in recovery, with sleep problems being one of the longest-lasting symptoms of detox.

Fortunately, there is some hope: addiction, and many of the sleep problems along with it, is treatable. The better you sleep, the lower your risk of relapse. Master your sleep, and it's much easier to stick to your recovery plan.

*If you or a loved one are dealing with addiction and seeking help, please visit the Substance Abuse and Mental Health Services Administration online provider directory or call 800-662-4357 (available toll-free 24/7).*

Keep reading to understand how different addictions affect sleep, the common sleep disorders associated

with addiction and recovery, and how you can sleep better during recovery.

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## How Different Addictions Interfere with Sleep

We mentioned in our introduction that certain addictions actually alter one's sleep architecture. Below we review how different addictions – drug, alcohol, and behavioral – negatively affect sleep.

**Sedatives: alcohol and marijuana**

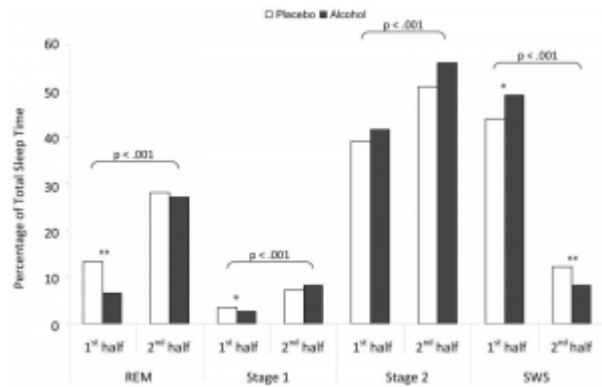
**Alcohol** is a depressant, which leads many people to mistakenly view it as a sleep aid. Between 20 to 30% of Americans with insomnia report turning to alcohol to help them fall asleep.

As a depressant, alcohol does help you fall asleep, but alcohol-induced sleep isn't restful sleep. Alcoholism or not, people who sleep after a night of drinking increase their risk of

nightmares, bedwetting, night sweats, snoring and sleep apnea.

Much of alcohol's disruption to sleep has to do with how it affects your core body temperature. Your body temperature is just one of the many mechanisms involved in regulating whether you're asleep or not. In the evening your body temperature begins to drop, making you feel drowsy as your brain releases melatonin. In the morning, your body temperature begins to rise again, waking you up for the day. Alcohol drops your body temperature, which is why it helps you fall asleep, but as the alcohol wears off, your body responds by increasing your temperature, which leads to night sweats and early waking.

Alcoholics also spend less time in REM sleep, the stage of sleep where we dream, process learnings from the day and commit them to memory. Scientists have linked daytime cognitive performance with sufficient REM sleep. Without it, our creativity and mental performance suffer.



Alcoholics also experience alpha and delta brain waves together – rather than separately, leading to disrupted sleep. Insomnia and sleep deprivation are present throughout alcoholism and recovery.

Like alcohol, **marijuana** is another substance people often use as a sleep aid. It doesn't cause early waking like alcohol, but it still interrupts with sleep, decreasing the user's amount of REM sleep. The effect on REM sleep is so strong that marijuana users who quit are prone to vivid, odd dreams for months afterwards.

Stimulants: cocaine, amphetamines, MDMA and hallucinogens

Stimulants like cocaine, amphetamines, and MDMA are all

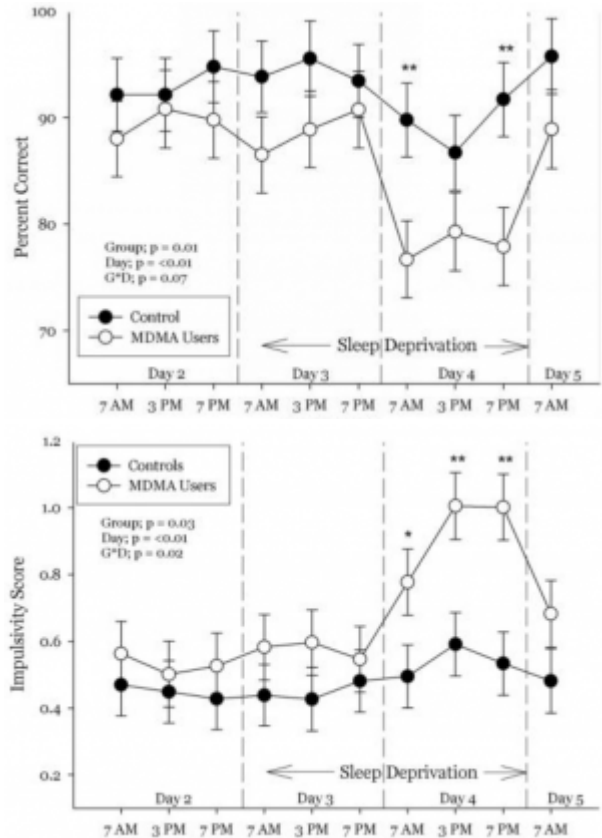
energizing drugs, so it's easy to imagine how they interfere with sleep.

Users of these drugs become addicted to the energizing high they create by flooding their brain with dopamine. During their high, they'll experience insomnia, so energized that it's tough to fall asleep, followed by periods of hypersomnia during withdrawal.

Just as a night of casually drinking alcohol affects REM sleep, so does a low dose of cocaine. Chronic use of **cocaine** and **ecstasy** both reduce REM sleep, causing sleep deprivation that has a noticeable impact on their daytime cognitive performance.

**MDMA** has a special effect on the brain and sleep architecture because it gradually eats away at the brain's serotonin levels. Since serotonin is part of the melatonin production process, ecstasy users experience sleep deprivation symptoms sooner than users of other types of drugs, especially in regards to their cognitive performance ("Percent Correct" in the

chart below on the left) and impulsivity:



Even once they've gone through recovery, especially heavy MDMA users display apparently [permanent changes to their sleep architecture](#). Heavy users of cocaine and amphetamines also [appear](#) to permanently alter their [circadian rhythms](#) and may experience disrupted sleep forever. Additionally, cocaine withdrawal is associated with nightmares as well.

## Opioids

Our bodies are not equipped to handle intense levels of pain on our own, which is why opioids like methadone, oxycodone, and hydrocodone are available in prescription form. These drugs help individuals cope with the severe or chronic pain associated with surgery, cancer, or other health

procedures and issues. Opioids work by attaching to the dopamine receptors in your brain, enabling your brain to better handle the pain.

Unfortunately, when abused – or not used as directed – opioids create a similar euphoric effect to cocaine, due to the way they interact with your dopamine receptors. If a person continues to abuse opioids, the more reliant they become on them in order to deal with even lesser amounts of pain. This results in addiction.

Like the other addictions on this list, opioid abusers experience less REM sleep. Their REM sleep is cut in half, as is their deep sleep (the stage of sleep where your body repairs and restores your muscles and body tissue). More of their time is spent in light sleep, which, while important, is much less restorative. They also get less sleep overall, and incur an increased risk for central sleep apnea.

All these effects combine to cause sleep deprivation that affects opioid addicts mentally and physically during



the day, worsening their memory and their tolerance for pain. Even without abuse, chronic as-prescribed use of opioids interferes with your sleep architecture to such an extent that it causes fatigue.

Like most forms of addiction, opioid withdrawal is intense, but opioid addicts in particular are at increased risk for [restless legs syndrome \(RLS\)](#).

### [Sleep medication](#)

Like opioids, prescription [sleep medications](#) like Ambien, Sonata, and Lunesta are another common and legal form of medication people become addicted to. Because it's a legal drug, sleep medications seems safe, so people take liberties with their dosage without consulting their doctor first. They may increase their dosage or take it more often than prescribed, increasing their risk for addiction.

Like a glass of wine before bed, people think nothing of taking sleep medication before sleep. However, these drugs are [not approved or intended for long-term use](#).

Unfortunately, the more often people take them, the more likely they are to come to rely on them to fall asleep just as opioid abusers need their drugs to manage their pain.

The moment they have trouble falling asleep, people go straight back to sleep medication instead of trying other behavioral methods. This results in overuse and abuse of the medication that's especially dangerous and associated with a [tripled mortality risk](#), cancer, and driving while asleep.

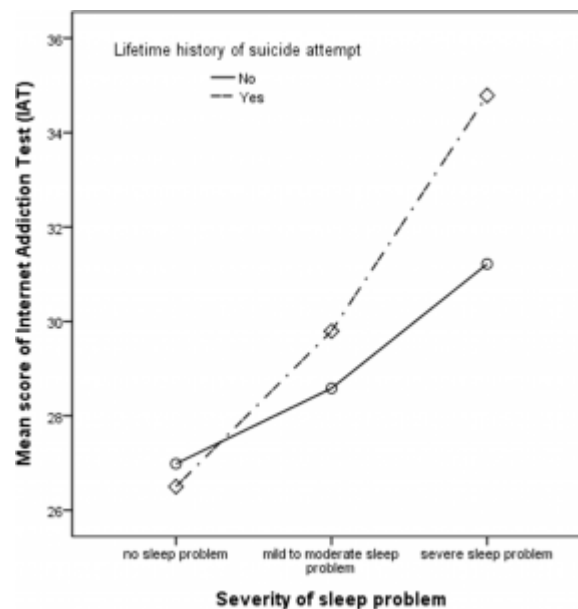
### [Behavioral addictions: Gambling, internet, and social media](#)

Behavioral addictions like gambling and internet may not initially have the devastating physical effects of other drugs, but they do [interfere with sleep](#) and worsen one's emotional and mental health. When you consider the correlation of poor mental health with outcomes like suicide, the physical risk becomes clear.

Addictive gamblers and internet users alike are at increased risk for anxiety and mood disorders that often cause,

co-exist with, or contribute to insomnia. The worse their sleep, the worse they feel about their addiction – fueling a vicious cycle.

For example, studies of college-aged smartphone addicts show a **direct relationship** between high smartphone use and depression, anxiety, sleep problems, and associated daytime dysfunction. The sleep deprivation caused by behavioral addictions like internet addiction leads to depression and a significant **increase in suicide attempts**:



Social media addiction has also been increasingly linked to insomnia and disturbed sleep. A 2014 study found a **direct relationship** between the

amount of time an individual spent on social media, and the severity of their disturbed sleep. The top quartile of individuals, based on social media use, were twice as likely to have sleep issues than the bottom quartile. The more frequently they logged in, the higher their risk for sleep issues. Social media abuse is also linked with depression and anxiety, which are major contributors to insomnia on their own.

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## **Addiction-Related Sleep Disorders**

You probably noticed a common theme as you read the above section. Across the board, addictions reduce REM sleep, which is a problem in itself. However, many addictions are associated with specific sleep disorders as well.

While many people turn to alcohol, drugs, and other substances to help them sleep in the first place, these addictions exacerbate existing sleep

problems and cause new ones of their own. Sleep problems caused by the addiction are known as **substance-induced sleep disorders**.

Substance-induced sleep disorders include:

- **Insomnia:** Chronic [insomnia](#) describes regular difficulty falling or staying asleep, perhaps waking up too early or multiple times during the night. Insomnia is an extremely common symptom of both addiction and recovery, for sedatives, stimulants, prescription drugs, and behavioral addictions alike.
- **Hypersomnia:** [Hypersomnia](#) describes excessive daytime sleepiness, or a lack of feeling unrefreshed from sleep. Often, it occurs with insomnia. People who can't fall asleep tend to demonstrate symptoms of hypersomnia as well, frequently oversleeping or falling asleep during the day.
- **Parasomnias:** This is a catch-all for abnormal sleep behaviors,

such as sleepwalking or night terrors. [Parasomnias](#) are a common experience of hallucinogen abuse, and may create further insomnia, as individuals become afraid to fall asleep and experience the behavior. Nightmares are a frequent occurrence for those in marijuana or cocaine withdrawal.

- **Sleep apnea:** Sleep apnea is a form of sleep-disordered breathing where the individual stops breathing momentarily during sleep. It may be caused by a relaxation of the throat muscles (as occurs with alcohol abuse and obstructive sleep apnea), or from a miscommunication with the brain (as with opioid addicts and central sleep apnea). The brain has to “wake up” in order to get you start breathing again, reducing the quality of your sleep even if you don’t remember waking up. Sleep apnea is experienced by [over half](#) of people with addiction.
- **Restless legs syndrome (RLS):** [RLS](#) is a disorder where

individuals experience an uncomfortable sensation in their lower limbs that can only be relieved by moving them. It typically occurs when the individual is lying down, as one is when you're lying in bed. The constant need to move the legs in order to calm the sensation makes it difficult to relax sufficiently to fall asleep. RLS affects [a third of addicts](#) and is particularly common among opioid addicts.

### Sleep deprivation

Each one of these sleep issues contributes to the **sleep deprivation** that makes one more reliant on their addiction to sleep, focus, or just feel okay – and makes it that much harder to stick to a detox plan.

Whether they're not [getting enough sleep](#) overall, or the sleep they're getting is just lower quality, people experience the same effects of sleep deprivation. These include difficulty focusing, trouble remembering things,

poor decision-making, emotional volatility, decreased reaction time, and in the long-term, increased risk for cancer, diabetes, and heart disease.

Sleep deprivation is often linked with substance abuse, as both a symptom and a cause. Among adolescents, poor sleep is itself a predictor for marijuana and cigarette use. Chronic sleep deprivation reduces your dopamine, and since addicts may already be damaging their dopamine receptors, this makes them even more dependent on their addiction to regulate their emotions and response to pain.

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## **Sleep Problems During Addiction Recovery**

The beginning stages of detox are rough for all types of addiction. The first few days to a week see physical symptoms that are extremely uncomfortable, such as shakes or tremors, fever, vomiting, and headaches. Emotional symptoms



understandably accompany these, including poor mood, depression, anxiety, and irritability.

Symptoms vary by individual, addiction, and the severity of their addiction. For instance, some people withdrawing from sleep medication may experience seizures, and 5% of alcoholics may experience **delirium tremens (DTs)**. DTs describe a group of additional symptoms such as hallucinations, heavy sweating, and increased heart rate.

Because symptoms can vary, it is important to seek medical help and guidance as you begin recovery. While some can succeed with a cold turkey approach, for others it can be dangerous. Individuals with addictions to opioid and sleep medications are often advised to go slowly and taper their dosage down to minimize the severity of withdrawal symptoms and reduce their risk for relapse.

By the end of your first week of detox, most of the physical symptoms either disappear or significantly decrease in

severity. Remaining symptoms will continue to gradually diminish in the following months.

### Insomnia during detox

However, one pesky symptom that stays ever present seems to be sleep problems. Insomnia is one of the most common, and persistent, symptoms of withdrawal.

Insomnia is challenging enough to deal with when you're not in detox. As we noted above, it's so challenging that it's what drives many people to sedative drugs and alcohol in the first place. When you're in withdrawal, however, you're experiencing a variety of uncomfortable symptoms, sensations, and feelings that you haven't encountered before – and you're having to face them without the crutch that got you by before.

Many of the drugs we described above, such as cocaine, ecstasy, opioids, and amphetamines, upset your brain's dopamine production. During your addiction, your brain became used to a new level of "normal" – which relied on

those drugs to help you deal with pain and stay balanced emotionally. During the first few weeks of withdrawal, your brain slowly stabilizes back to normal dopamine production. While that's happening, however, physical pain and negative emotions like stress and anxiety are much harder to bear.

It's not just physical, either. People who drank or smoked marijuana before bed trained their mind to recognize those activities to precursors to sleep. Without them, your brain is suddenly left wondering when it's time to go to bed.

Meanwhile, you're running on less or poor quality sleep thanks to your detox-induced insomnia. This causes sleep deprivation that further reduces your tolerance for pain, and makes you quick to lash out at others or get irritable.

Insomnia is one of the biggest predictors of relapse, and the risk is doubled for those who develop a sleep disorder. This is why experts recommend that individuals include

sleep as part of the treatment plan. Research shows that treating insomnia improves both sleep quality and symptoms of depression in those with alcoholism.

Depending on the severity of your addiction, sleep problems associated with recovery can last for years. Fortunately, once you start sleeping better consistently, you can take it as evidence that you've fully detoxed.

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## **Tips for Improving Sleep During Addiction Recovery**

One of the best things you can do to ease the uncomfortable symptoms of recovery and ensure your ultimate success is to get good sleep. Of course, that's easier said than done.

Follow these tips to get better sleep during addiction recovery.

1. Get help from others.

It takes a village to recover from addiction. Open yourself up to others and ask them for help during this difficult time. Your loved ones care about you and want you to succeed; chances are they will be happy to help. Ask if you can spend the night with them during rough periods, or coordinate times for them to check in on you and see if you need anything.

Consider joining local support groups, too. Speaking with others who have gone through addiction recovery, or are currently going through it like yourself, can be helpful because they understand just how you feel. [This website](#) lists resources for various addictions, including 12-step groups, online forums, and treatment center locator tools.

## 2. Try cognitive behavioral therapy.

You round out your support system further with professional therapy and medical help. [Recovery.org](#) and [SAMHSA](#) both offer online directories to help you find treatment centers and

health professionals who specialize in treating your addiction.

**Cognitive behavioral therapy** in particular may be helpful. It's a psychotherapy technique that involves 6 to 12 sessions. A therapist works with the patient to help them recognize the negative thoughts and behavioral patterns contributing to their problem. CBT treats a variety of issues ranging from addiction to mood disorders and insomnia.

CBT-I is a subset focused specifically treating insomnia. In CBT-I, therapists work with individuals to educate them about sleep hygiene (more on this in the next tip), adjusting their sleep environment to promote sleep instead of prevent it (more on this in the tip after that), and practice different therapies such as [relaxation exercises](#) to induce sleep, sleep restriction to retrain the body to follow a specific sleep schedule, and more.

### 3. Improve your sleep hygiene.

Sleep hygiene describes the behaviors and thoughts you have around sleep.

Having good sleep hygiene is often as simple as learning what it is, and adjusting your behaviors accordingly.

For instance, good sleep hygiene includes following a regular sleep schedule, keeping your bedroom cool and dark, not eating or exercising before bed, avoiding alcohol or caffeine later in the day, and turning off your electronics before bed.

Electronics energize the mind, flooding your retinas with strong blue light that tricks your brain into thinking it's daytime and time to be up and awake.

#### 4. Turn your bedroom into a sleep-promoting environment.

Devote your bedroom to sleep and sex only – this trains your mind to associate it as a place of relaxation only. Avoid doing work or hobbies in your bedroom.

Make this goal easier to achieve by removing stressful clutter, work items like a computer or desk, and even fun distractions like a TV from your bedroom.

Invest in a comfortable [mattress](#) that feels great to sleep on. Keep your bedroom dark and cool with blackout curtains. Force your mind to focus on sleep alone with eye masks that block out light and white noise machines that drown out the noise.

If you have difficulty falling asleep due to the feelings of anxiety that accompany the recovery process, try keeping a diary. You can write your thoughts down in there, freeing them from your mind so you can focus on sleep and leave your worries for another day.

#### 5. [Follow a regular sleep schedule.](#)

Set a regular sleep schedule and follow it daily, even on weekends. You want to train your mind to naturally tire and wake up at the same time each day. Sticking to a schedule makes it easier to stick to other parts of your treatment plan.

Avoid taking naps if possible, but if you absolutely must, [limit them to 30 minutes](#) and don't take them past the



afternoon. Otherwise, it will only be harder to fall asleep that night.

Consider pairing your sleep schedule with a [nightly bedtime routine](#). In the 30 minutes before bed each night, follow the same set of calming activities to teach your brain that it's time for sleep. You might practice [meditation](#), read a book, or listen to some relaxing music.

#### 6. Try bright light therapy.

[Bright light therapy](#) involves sitting in front of an artificial light box that's specially designed to mimic the strength of sunlight without the UV rays.

Exposure to this light in the morning helps reset your circadian rhythms and can offset the fatigue of sleep deprivation and hypersomnia.

Alternately, boost your energy levels by getting lots of natural sunlight. Go for a walk in the morning outside, or position your work desk to be by a window.

## 7. Watch your diet and exercise.

Speaking of walking, exercise is a great way to get out excess energy and physically tire your body in preparation for sleep later that night. Just be sure to do it in the earlier part of the day, or you'll be energized to go for another run when you need to be falling asleep.

Watch what you eat as well. Avoid heavy meals before bed, and try to eat healthy generally. Healthier foods promote better mood and better sleep. Limit your caffeine intake, and satisfy your thirst with water instead.

Beyond eating healthy generally, you may also choose to focus on foods high in [tryptophan](#) specifically. Tryptophan helps your brain metabolize serotonin and melatonin, the hormone that regulates your sleep. By eating more tryptophan-rich foods, you can help naturally boost your melatonin levels. Good foods include: nuts, fish, beans, and dairy products like cheese and eggs.

## 8. Avoid using prescription sleep aids.

While prescription sleep aids can improve sleep, the potential for addiction is extremely high with these drugs, and it increases if the individual has a history of addiction to another substance.

It's best for those in recovery to avoid over-the-counter sleep aids as well. While the risk for addiction is lower, the problem with sleep aids of any kind is that individuals often don't realize that they have developed a dependence until it's too late.

Instead, you may supplement your newly improved sleep hygiene habits with natural sleep aids that calm and soothe you without presenting a risk for addiction. Try drinking a cup of chamomile tea before bed, or getting lavender essential oils for your aromatherapy diffuser.

## 9. Manage anxiety.

Anxiety is one of the most common mental health disorders, and it goes hand in hand with addiction and addiction recovery. About 20% of

people suffer from both substance abuse and social anxiety disorder.

Even without a pre-existing anxiety disorder, the stress of recovery can be a trigger for anxiety on its own. CBT can be extremely effective for treating anxiety, so if you are seeing a therapist, ask them to help you work through your anxiety. In addition to therapy, you may also work independently on managing your anxiety through meditation, yoga, journaling, massage, or acupuncture.

#### 10. Pay attention to what works.

As you try these different approaches to improve your sleep, you may find that some work better than others. Feel free to adjust accordingly. If meditation proves frustrating but you find it helpful to be in a quiet environment before bed, figure out how to do more of that. You might try out different white noise playlists or sleep headphones, for instance.

Some people find it helpful to keep a sleep diary. In your sleep diary, you can keep track of your daily exercise

and food, as well as when you are going to sleep and waking up. This can point out areas for improvement—such as times where you think you’re getting enough sleep, but you’re really not.

Living through addiction recovery is difficult and challenging, but there is hope on the other side. While sleep problems often linger throughout recovery—even for several months—your sleep will improve with time. Good luck.

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