

AHS Complementary and Integrative Medicine Section: Patient Education Kit for Migraine

Sleep: Healthy sleep practices include good quality sleep, sleep of sufficient duration, and sleep at regular intervals. In addition, it is important that any underlying sleep disorders be diagnosed and treated.¹ Healthy sleep practices can decrease headache frequency.² The benefits of healthy sleep practices can also extend beyond headache, for example, helping improve mood.³

Consider integrating the strategies below to improve your sleep:

- **Sleep duration:** Most adults require 7 to 9 hours of sleep per night. Though this range may vary individually (e.g., due to genetics, environmental, or other factors), sleeping fewer than 7 hours per night has been associated with increased perception of pain and medical conditions. Therefore, aim to sleep at least 7 hours per night on a regular basis to promote optimal health.¹
- **Sleep timing/regularity:** Maintain regular bed and wake times, ideally within 1 hour. This is especially important on weekends, when a sudden decline in stress level, combined with delayed caffeine intake, can cause a “let-down” headache.⁴
- **Prepare for sleep:** Prepare your mind and body for sleep. Practice a bedtime routine. Use meditation or biofeedback to calm your mind. Maintain a quiet, dark sleeping space.⁵
- **Factors that affect sleep:** Limit caffeine, particularly in the latter half of the day. Caffeine consumption close to bedtime disrupts sleep, and greater doses are associated with increased sleep disruption. Discontinue nicotine, as this also disrupts sleep. Though alcohol can help individuals fall asleep more quickly, it too disturbs sleep by causing nighttime awakenings.⁵
- **Sleep disturbances/disorders:** There is a strong link between sleep and headache.⁶ Speak with your doctor if you have a history of snoring, difficulty falling or staying asleep, or have concern about an underlying sleep disorder.

References:

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3. Palacios-Ceña, María, et al. "The association of headache frequency with pain interference and the burden of disease is mediated by depression and sleep quality, but not anxiety, in chronic tension type headache." *The journal of headache and pain* 18.1 (2017): 19.
4. Lipton RB, Buse DC, Hall CB, Tennen H, Defreitas TA, Borkowski TM, Grosberg BM, Haut SR. Reduction in perceived stress as a migraine trigger: testing the "let-down headache" hypothesis. *Neurology*. 2014 Apr 22;82(16):1395-401.
5. Irish, Leah A., et al. "The role of sleep hygiene in promoting public health: A review of empirical evidence." *Sleep medicine reviews* 22 (2015): 23-36.
6. Freedom, Thomas, and Randolph W. Evans. "Headache and sleep." *Headache: The Journal of Head and Face Pain* 53.8 (2013): 1358-1366.