

Rebellious Wellness^{over 50}

Why Sleep Must Become Your Healthy Aging Priority



Episode 69: Why Sleep Must Become Your Healthy Aging Priority with Gregory Anne Cox

Hey all, if you think poor sleep, less sleep or insomnia are just a part of aging and goes in the, 'Oh well' category, this shorty aims to set you straight. While it's true enough sound sleep, every night is harder to come by as we age, it is in no way an "oh well." The latest sleep science proves that sleep is so important

it is considered not one of the pillars of good health, but the foundation upon which all other habits rely. If you already have my power of five email course, then you'll know that sleep is one of the power of five. Soon you'll be getting an update,

putting sleep in that foundational place. If you don't have that yet, you can find it at rebellious wellness, over fifty.com/power5.

Number five. I stand by my theory of the power of five, that it is one of five things, but I wanna add the new data about how sleep affects the immune system, potential dementia, Alzheimer's, weight gain, and aging in general, give it more of a star power position in the five.

But let's get started on the sleep thing.

This subject can get complicated fast, I'm gonna give you a simple exploration of the kinds of sleep problems you might encounter uh, the toll lack of sleep takes on us and we age and things you can do to restore you to a full night's sleep.

Much of the recent granular data we have on sleep comes from one man and his colleagues.

His name is Matt Walker. Matt is one of the foremost researchers on sleep in the world today. He is a neuroscientist, a professor, the author of a fascinating book titled *Why We Sleep*. He runs the center for human sleep science at Berkeley. He seems to speak in quotable. So here's one for you, "Sleep is the greatest life support system you could ever wish for.

It's a remarkable health insurance policy. It is largely democratic. It's free and it's largely painless." Well, some people find it painful to try and get a good night's sleep, but basically the act of sleeping is mostly painless.

Let's talk about sleep as the foundation of health. In terms of de-risking us for just about every disease that's killing us in the developed world, it's very hard to look no further than sleep, Matt says, nutrition and exercise are important. But sleep, as I mentioned a minute ago, is the foundation.

Contrary to some contrarian science it's not a mistake that mother nature created this need for eight hours. You always heard eight hours, nine hours, seven hours, pretty much it's eight, eight and a half hours for the average, everyday human. And if you're going to try to sleep less or you don't have the ability to sleep as much as you want, while you have the ability, if you don't have the potential to sleep as much as you want because of work, family life, pain, whatever it is,

you are going to lessen your deep REM and non-REM sleep. Both of which provide the brain and body with lots of specific benefits. And it happens in cycles throughout the night. So most people get up earlier than they want to. Those last

couple of hours of REM sleep and non REM sleep are when we formulate our memories, and how the brain makes sense of what happened during.

Growth hormones that help with organ and muscle and tissue repair are also released at that time. And if you're recovering from an injury, this is when your body does the most work to heal itself. Now I know lots of people listening have heard rockstar entrepreneurs and woo gurus and personal development type suggest getting up at four or five to get a jump on the day.

Well, that's fine if you started in bed early enough, like at eight or nine o'clock, but if not, you're losing out on brain time, brain work time. But you might say I've always existed on just six hours. Well, existing is the key word here as with everything in health conversations, there's average health and optimal health average, or anything less than that is basically just existing.

As we age, the more time we spend working towards optimal, the better our experience of old age will be.

In a conversation with Dr. Peter Atilla, Matt mentions sleep efficiency. This is the time it takes you to fall asleep once you're in bed. So how efficient are you at getting to sleep? If it takes you 30 minutes to fall asleep and you get up to use the bathroom and it takes you 20 to 30 minutes to get back to sleep, and you were hoping for eight hours, then you have to be in bed for at least nine and a half.

I know that sounds crazy. I don't have that time. Well, maybe you do. I'm hoping you'll give yourself that time. Just consider it. In a minute, we're gonna talk about sleep hygiene, the little habits that we can put in place to help the brain get ready for sleep. But one thing you should not be doing during that pre sleep time is reading anything on your phone that excites you like social media, video games, anything that is stimulating, it's not so much the phones they're finding.

It's what the phone content does inside our brain that keeps us awake or makes it harder for us to fall asleep. You can read, of course you can read, listen to a meditation app, that kind of thing.

I used to maybe read Twitter and some other news sites, is not a good idea before we sleep and God, whatever happens tonight, will still be around tomorrow, it'll still be breaking news, but let's talk about insomnia for a second. What constitutes insomnia versus being sleep deprived? So insomnia isn't one single bad night, or even a string of bad night's sleep.

The way scientists and docs have thought about it is on the basis of three different features. One, sleep onset insomnia, it takes you a long time to fall asleep, sleep maintenance insomnia, you don't stay asleep, and non-restorative sleep. And you could have all three of those things sadly, that would be awful, but you could. If you're going to go and get a diagnosis of insomnia so that you can get some help, the clinicians will often use a rule called the 30, 30, and then three rule of thumb.

It means the following. If it takes you 30 minutes to fall asleep, at least 30 minutes to go back to sleep after waking during the night, and this is happening consistently, at least three nights a week, then you will be classified as somebody with insomnia and you can take steps from there. Insomnia is not sleep deprivation.

Sleep deprivation is defined as having the sufficient ability to generate sleep, but insufficient opportunity to get it. In other words, you could fall asleep if your schedule allowed insomnia is the opposite of this. Insomnia is the inefficient ability to generate good or quality. Despite having sufficient opportunity to sleep.

That make sense?

So here are a few side effects of insomnia and sleep deprivation. There are a couple of little sciencey terms for you. One first one is fuel partitioning, fuel partitioning simply refers to how our bodies decide how much to eat and what to do with the food we've eaten.

Put simply your hunger hormones, and subsequent feelings of full or hungry, get out of whack with sleep deprivation. How much to eat and how the body uses it is affected by sleep plain and simple.

Now here's some other bad news with a fun sciencey term for you. It's called the respiratory quotient and it goes up when you are sleep deprived. And all this means is that under the same level of exercise exertion or exertion of any kind the body would use glycogen for energy as opposed to using fat.

That means you don't burn the fat that you could be the next day when you're exercising because the body is depleted, the respiratory quotient has gone up. So what if your dieting while sleep deprived? Well, it doesn't get any better. A couple of studies showed that dieting when you've had six hours or less sleep was much less effective in terms of fat loss.

If you under slept, as they call it, for six hours or less, what you lose is lean muscle mass. The body holds on to fat. It's gotta be a preservation thing. And a big reason

for this is high levels of cortisol, the stress hormone and the response of insulin, because it's stressful to reduce your calories.

It's stressful to not sleep. So those things in combination are not helping anybody lose the weight that they're trying to lose.

Are many tools to correct sleep problems. We're gonna talk about sleep hygiene in a minute, which is kinda like the first line of defense before you start going for meds.

Supplements like melatonin.

Blue light blockers getting regular exercise during the day, believe it or not. And exposure to daylight. They recommend getting the sun and or bright light if it's winter or it's not a sunny day, directly into your eyes for the first 15 minutes upon waking. And body temperature. The ideal sleep temperature is 63 to 68.

If your thermostat's higher than that, and I would even say 68 is on the high end. Obviously everybody has a different experience of hot and cold but ideally our body temperature goes down as we prepare for sleep, our core body temperature. That's why a hot shower or bath before bed is ideal

for those who need help falling asleep.

And quickly here are the three categories of sleep problems, falling asleep called sleep onset, staying asleep, maintenance, insomnia, and general insomnia, which means you don't sleep as much when you want to be sleeping. Now sleep, as I said before, does get worse with age and here's Matt again.

"One of the most traumatic changes with age and the most sizeable and robust physiological changes with age that we see is that your sleep gets worse and sleep is probably one of the most powerful regulators of your immune system." Not great news. Right? We do all these other things like take supplements and

body biohacking and essential oils to boost our immune system. And actually we just crawl back into bed and go to sleep.

So how do you deal with those times when you wake up and you can't go back to sleep, if you read in bed and you struggle with sleep, either sleep onset or maintenance insomnia, you should read in a different room and just go to bed when you're sleepy.

Cause what you're teaching your body to do, if you're reading in bed and then you can't go to sleep, is that's the habit. I don't go to sleep. I just read. Then I stay awake. The brain is associative. And to break the association, you need to get up and go somewhere else and only go back to bed when you're sleepy. As Matt says, you wouldn't sit at the table waiting to get hungry so stop lying in bed, waiting to get sleepy.

Now we're gonna go to the sleep hygiene. This is the first line of defense, and many of you will probably be doing many of these things, but just a checklist for you in case you're not familiar with this idea of sleep hygiene. They're just the habits that we want to create or adjust for the brain.

Remember I said, the brain is associative and we'll begin to associate these habits and routines with getting ready to sleep.

Number one, get on a schedule that allows for winding down and whatever bathroom rituals you before you perform before bed, how much time it takes you to fall asleep, all of those things have to figure into the eight hours that you're gonna try to get.

So maybe you need an hour for all of these things before you actually want your eyes to close and you to go to sleep. It's just the reality peeps.

Now I want you to do a room check. Is it cool enough? Remember we talked about temperature 63 to 68. It's why it's easier to sleep in a cold room than it is to sleep in a hot room.

Is it completely dark? And I mean, no light can get to your eyes. Even if you close your eyes and you think you're not seeing the light, if there's light in your room and you're light sensitive and we are more so as we age, it is likely to keep you awake or wake you up later. If you don't wanna do a blackout treatment, try an eye shade I've been using one for years is made a huge difference.

Number three, is it quiet? You can't do much about the noise outside. You could try earplugs if it is bothersome on a regular basis. Maybe you have a snoring partner or somebody that moves around a lot in their sleep. You might wanna find an alternative sleeping arrangement.

I kid you not nothing wrong with sleeping separately. There's plenty of time to do other stuff. The good snugly stuff, et cetera when you're not trying to sleep.

Number four, is your bed comfortable? If your mattress is old and slightly uneven or no longer comfy and you're not in a position to buy a new one, consider buying a pillow topper.

They can change your whole experience of sleep and compared to a new mattress, they are a bargain. I have one on every bed in the house because I want every guest who comes to stay here to have a delicious sleep experience.

Where is your phone? This is number five. If you must keep it near the bed, just make sure you turn off the ringer, turn off the vibrate thing, cuz it may not ring, but that vibration on a wooden table, you're gonna hear it.

How bright is your bedroom before lights out?

If you have an overhead light and it's quite bright, maybe you wanna put it on a dimmer. If you have a bedside table and it's quite bright, maybe you wanna change the light. just try to use soft light in your bedroom, nothing glaring. And this is true for as the night goes on. As you start to wind down, if you can avoid bright lights in your living room, walking through your kitchen, it will really help.

Number seven. I want you to remove all electric clocks or alarm clocks that glow with that green lovely light. It subtly creates sleep anxiety if you do wake up and have to pee, or you have a hard time falling asleep to begin with.

There are two reasons for this. Light is the enemy of our sleep wake hormone melatonin.

And number two, seeing what time it is when you don't want to be awake, increases anxiety, which leads to increased cortisol. And there's no way you're going to sleep. You cannot fight physiology.

Number eight, do not eat two hours before you sleep.

Number nine change into whatever you sleep in or out of at the same time each night.

Think of yourself like a child at this point, children need routines to get them to sleep, and we are no different. And by the way, it's not about us. It's about our brains who are simply recording and creating grooves around our actions and our environment that say it's time to go to sleep.

What if none of those things are working?

Herbal remedies can be effective. You can buy melatonin. And it works for about half the population. Half people will get better sleep and not feel groggy. Half the people will either not get sleep and, or get sleep, but feel groggy. So then it's time to try something else. Some herbal combinations have hops, they might have valerian and those two things can make for some wild dreams. Now I tend to like wild, crazy dreams. If that bothers you, then you're gonna have to try something else.

All of these things are kind of a try it and see if it works kind of thing. Obviously I'm not recommending anybody take any kind of supplements without consulting a medical practitioner or other alternative practitioner.

I just know that these things can be helpful.

What about meditation? Meditation has some compelling data about decreasing the amount of time it takes for people to fall asleep and to improve the continuity of their sleep. So you can use a meditation app. You can create your own meditation.

Even just deep breathing when you wake up in the night will calm your autonomic nervous system and reduce the circulating cortisol, allowing you to fall back to sleep. So a simple trick that I learned who knows where is to pick two words, use one on the inhale, like peace and the other on the exhale, like sleep. And I just say those over and over again

when I wake up and need to get back to sleep and they work pretty well, but you can choose any words you want.

What about sleeping pills? We all want a good pill now, again.

For the short term, maybe, but none of the FDA approved black boxed prescription meds are intended for long term use. They leave most people groggy in the morning, and the FDA actually put out an extra warning in 2019 about these things to doctors to prescribe them less because there were more accidents happening and people were blackout cooking and driving and not remembering speaking to people, and more. Matt said, among the most commonly prescribed meds, like Lunesta and Ambien, they don't produce naturalistic sleep.

You have a higher risk of death and a higher risk of cancer if you use them regularly. And he went on to say that Ambien isn't like sleep, you're confusing sleep with a lack of consciousness.

They are termed sedative hypnotics, so like hitting you over the head and you're unconscious, it does not give restorative sleep. And Ambien he said is more like a chemical baseball bat to the head than actually something that promotes restorative and restful sleep. So between those two things and cancer, risk of death, risk of dementia, risk of Alzheimer's,

I mean, if you are using them no judgment. I'm just hoping that by having you hear this information, you might be inclined to go work with somebody to find an alternative. One of the alternatives that they suggest is called cognitive behavioral therapy for insomnia. It's , class within cognitive behavioral therapy specifically for insomnia.

And it has huge, huge kudos, lots of scientific data. Lots of people have been helped. Just Google C B T I for information. I'll also have a link on this page. It's just to retrain the insomniac brain to rest and eventually to sleep.

We've covered a lot. And if you'd like to refer to the content, grab the transcript on my website, you'll find it at rebelliouswellnessoverfifty.com/podcast.

Look for the episode titled "why sleep must become your healthy aging priority." I hope this has been helpful. If there's a subject you'd like me to talk about on one of these episodes, get information for you on, just hit me up Gregory at rebelliouswellnessoverfifty.com.

Be well till next time, peeps.