

Insomnia: Complementary/Alternative Medicine

Difficulty falling asleep (sleep-onset insomnia)

Frequent or early awakening (sleep-maintenance insomnia)

QUICK REVIEW

- Insomnia affects almost one out of every three people in the United States during the course of a year.

- Effective treatment involves identifying and addressing causative factors and eliminating factors that can disrupt sleep.

In addition to side effects, the major problem with sleeping pills is their interference with normal sleep.

The most common causes of insomnia are psychological: depression, anxiety, and tension.

If psychological factors do not seem to be the cause, various foods, drinks, and medications may be responsible.

- There are numerous compounds in food and drink and well over three hundred drugs that can interfere with normal sleep.

- The two major classifications of insomnia are sleep-onset and sleep-maintenance.

- 5-HTP provides better results than those achieved with L-tryptophan.

- Melatonin is only effective as a sedative when body melatonin levels are low. Restless-legs syndrome and myoclonus may respond to folic acid therapy, iron supplementation, and other nutritional therapies.

Valerian and passionflower can promote improved sleep quality and relief of

TREATMENT SUMMARY

Effective treatment involves identifying and addressing causative factors. If depression is a possibility, please consult DEPRESSION. Once a normal sleep pattern has been established, the dosages of the recommended supplements and botanicals should be slowly decreased.

Lifestyle

Institute a regular exercise program that elevates heart rate by fifty to seventy-five percent for at least twenty minutes each day. Perform progressive relaxation exercises to help fall asleep.

Nutritional Supplements

Take the following forty-five minutes before bedtime:

Niacin: 100 mg (decrease dose if uncomfortable flushing interferes with sleep induction)

Vitamin B6: 50 mg

Magnesium: 250 mg • 5-HTP: 100-300 mg

Melatonin: 5 mg

Botanical Medicines

Take the following forty-five minutes before bedtime:

- *Valeriana officinalis*

Dried root (or as tea): 2-3 g Tincture (1:5): 4-6 ml (1-1.5 tsp) Fluid extract (1:1): 1-2 ml (0.5-1 tsp) Dry powdered extract (0.8% valerenic acid): 150-300 mg

Passiflora incarnata (best when used with 5-HTP)

Dried herb (or as tea): 4-8 g Tincture (1:5): 6-8 ml (1.5-2 tsp) Fluid extract (1:1): 2-4 ml (0.5-1 tsp) Dry powdered extract (2.6% flavonoids): 300-450 mg