Small Changes, Big Sleep Impact: Everyday Choices Transcript

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Introduction and Guest Welcome

Hello again, everyone. It's Dr. Wells from the Sleep Deep Summit. New approaches in treating sleep apnea and insomnia and next up is Dr. Andrea Matsumura.

She is a board certified sleep medicine specialist and she describes herself as a holistic sleep medicine doc. Since the entire mind and body are affected by poor quality or lack of sleep.

Welcome, Dr. Matsumura. Thank you. Thank you so much for having me. Yeah, you know, I'm really excited to talk to you today because we're going to dig into some of the home remedies that people try to use for improving their sleep quality.

And I want to start off with alcohol. Now, in my experience, people will tell me, you know, I have a nightcap so I can get to sleep better. And I think that's a really common coping mechanism, aside from the social implications and effects of alcohol.

Alcohol and Sleep Quality

So why don't we start there with what alcohol does to our bodies and to our sleep? Sure. Well, I mean, people certainly are aren't alone. A lot of people do use alcohol as a sleep aid.

And in fact, you know, a lot of folks, when you start talking to them, they'll say that they have to have one or two and then that can be in different quantities.

So just to be on the same page with everyone, it's either five ounces of wine, one ounce of liquor or one regular beer. Some people like to say that microbrews are a little bit stronger.

But it's basically one can of beer that is a serving of alcohol. And men should not have more than two. Women should not have more than one. As we say, that's moderation.

However, if you're using it for sleep, it can really affect your sleep in the middle of the night and really affect the quality of your sleep. So while it makes people feel tired and they might use it as a way to help them fall asleep and feel like they're doing something really good for their body.

Most people, when you start asking them, Well, how how do you feel in the morning? Or Do you have to wake up in the middle of the night? A lot of people will in fact say, well, I still wake up in the middle of the night.

And that's because alcohol generally will have this effect on the body, where after it starts to be metabolized, it causes this wakefulness in the middle of the night.

It can reduce our dreams sleep. So dream sleep is called REM sleep and it can lessen your REM sleep. And most importantly, if you have sleep apnea, it can make it worse.

So you might be masking a situation that is needing treatment. And in fact, doing more harm to your body than you think because you're drinking alcohol to help you sleep.

Yeah, a lot of layers there of how alcohol negatively impacts sleep. I think it's interesting that it selectively paralyzes the genioglossus muscle or the tongue, making it fall back into the airway and then it's more prone to collapse.

And those airway blockages that cause sleep apnea. And also, alcohol is a diuretic, which means. Yes, we're going to go to the bathroom more often. So we might be getting up to go to the bathroom in the middle of the night, more

so because we drink alcohol versus, you know, not drinking alcohol.

That might just add to that disruption of sleep in the middle of the night. And, you know, it's funny that you talk about the tongue kind of falling back and worsening or causing more symptoms around apnea.

A lot of people will come in and say, oh, yeah, my partner says when I drink alcohol or my snoring is really bad. And that's that's what because that's what alcohol is doing.

It's relaxing that tongue even more, causing even more symptoms of sleep apnea. Exactly right. And so I think a good question is, well, what can I do to change this?

Should I drink less? Should I drink earlier? What sort of choices? Yeah. You know, the key is kind of dialing it back and saying, well, what am I really trying to treat?

Why am I having a nightcap? Is it because I'm getting into bed and I'm lying there? I can't fall asleep? Is it because I feel a lot of stress from the day and I'm using this to wind down because I don't want to bring the stress into my bed because it keeps me awake.

Or is it because I have to drink? It's something that I may have developed a habit around. And maybe I should talk to someone about my habit. Yeah. Taking a hard look at that is important because it definitely impacts your long term health.

And, you know, there's been a lot of data about alcohol over the past 20 years. You know, the idea was out there at one point that red wine was slightly better for you.

Some people associate a different effect from liquor as opposed to wine or beer. You know, I think some of that may be true based on the sugar content of the drinks that you're having. But what sort of myths have you heard about and how can you dispel them?

Gosh, yeah. So myths one myth I had brought up that, for instance, light beers are less problematic than darker beers or heavier beers. It's really about, as you had mentioned, the sugar content and the alcohol content.

So that's really it's not really about only the amount that you're drinking, but the level of alcohol that you're drinking. So, you know, something that's 100 proof is certainly going to hit you a lot harder than something that is, you know, nine, 9% alcohol by volume, you know, something like that.

But overall, people sometimes will say, well, that's not what is causing me to wake up in the middle of the night or that can't possibly be causing problems in the middle of the night.

And in fact, it does. It's you know, now the latest literature questions whether or not we really should be drinking any alcohol altogether. And, you know, many of us, including myself, I kind of think, yeah, I understand that.

And I'm going to take that risk and have an occasional glass of wine regardless. But in truth, the data that is coming out now is really dispelling the myth that we shouldn't even have any type of moderation in alcohol, that really it is a poison to our body and it's definitely affecting our sleep.

Yeah, I've seen that too, and I tend to agree that there's no safe minimum of alcohol. One thing that kind of came up is you were talking was the idea of a home for which is like at home, if you have your glass of wine, it tends to be kind of eight ounces.

So you're kind of generous with your with your wine compared to a restaurant for where they need to be measured. So that they can manage the cost of the alcohol.

So I really encourage people to make sure that you are always aware of how much you're consumed, being consumed earlier and stop before sleep if you're able, and also to pull that back if your sleep is affected.

I agree. And also being mindful about how much you're actually taking and you're right.

Caffeine Timing and Sleep Impact

That's so important. And and really, again, not drinking it at bedtime, that's like the absolute worst time to drink alcohol. Yeah. Yeah. So we'll shift gears and talk about another drink, which is caffeine, coffee, tea, some chocolates have it, but caffeine is used to kind of prop us up or give us a jolt.

Tell us about the half life and what you would recommend to people who are using caffeine. Yeah, absolutely. So first off, caffeine has both alerting and stimulating effects in the brain and it has a six hour half life.

So we we generally will tell folks, you know, you shouldn't have it at least 6 hours before bedtime. So there's also, you know, different amounts of how concentrated caffeine certain drinks may may be with regard to caffeine.

Again, this goes back to everything in moderation. A lot of us will get up in the morning and the first thing we do is we want to have coffee. And really coffee is antagonizing this receptor in our brain for adenosine adenosine makes us sleepy.

And so caffeine combats that and that in some ways we are building up adenosine throughout the day. And really the ideal time to drink coffee is probably about four or 5 hours after we've woken up.

But many of us are chronically sleep deprived, so we can literally drink coffee any time of the day. And I absolutely laugh and giggle to myself when people say, Oh, I can have a cup of coffee or an espresso and go right to sleep.

And I usually tell them, Well, you've just confirmed the fact that you are chronically sleep deprived. Not that it's not that you are immune to caffeine.

It is. It is that you are so tired, so sleepy, that it's not having an effect on you. So incredible. Yeah. Yeah. I've heard that too. And I always. I feel a little bit cringing because, you know, it it's like not only the degree that they're sleep deprived is out of their awareness because we're always establishing a new normal, aren't we, to whatever chronic situation we're in. But, you know, they people who drink caffeine like a full on cup of coffee right before bed are probably interrupting their sleep, thereby perpetuating the issue.

Absolutely. We know that data suggest that if you drink caffeine too close to bedtime, it can shorten your total sleep time by around 30 minutes. So that's that's pretty significant, too, if you're already shorting yourself on sleep and then you drink too much caffeine, too close to bedtime, then you're getting yourself even more sleep.

So really, again, in moderation, we also have lots of big tumblers in our society now. Right. So people will often say, oh, I have one cup, but it's, you know, a 20 ounce cup of coffee because they're using the big tumblers.

I will ask patients, I need you to quantify just how much you're drinking. And then some people will actually stop and pause and realize I'm drinking a lot of coffee a day.

I didn't even realize it, and I'm using it to help me try to stay awake. So, again, I love coffee, I love the taste of coffee, but I definitely limit my caffeine intake to the first half of the day and only, you know, 8 to 12 ounces total.

I don't think there's anything wrong with drinking coffee, but you really have to limit it and you have to time it correctly. I totally agree. And I want to share with you my big tumbler for this.

This is my cup of coffee and I'm sure this is probably a 16 ounce mug. You know, one of the little tricks that I do is I start my day with a cup of decaf coffee.

And that takes me about an hour and a half to get through with a couple of heats in between as I'm getting the kids ready for school and things, and then I'll switch to caffeinated coffee and I've two cups and then I'm done.

I'm curious to know what your timing is for caffeine. Yeah, you know, I love the taste of it and it's more of a ritual for me. So I have one. I'm one of the lucky ones, so I can stop drinking coffee and I don't get any headaches or I don't feel more agitated.

I can stop and start it, but I generally really enjoy a cup within the first hour of waking and I'll have a caffeine. I personally don't like the taste of decaffeinated coffee.

Maybe I haven't tried the right brand, but I'll have one cup of coffee and then I might pour myself a second one. But generally by noon I, I. Even if it's still at my desk, I'm sipping, but I'm not really enjoying the taste anymore.

It's almost as though in my brain I made that decision that at noon you should stop drinking coffee and move to water or water only or tea. That's not caffeinated.

And there's there's so much on the market out there that you can substitute with. But coffee, it really should be something that is in moderation and limited overall.

Yeah. And you know, I think that there's a good point in there, which is watching your sugar content as well or the calories in the drinks that you have because especially if you do something like working or engaging with other people socially, you tend to discount that type of calorie that you're taking in.

Alcohol is another example, but coffee or other caffeinated beverages late into the afternoon because of that, half life will still affect sleep quality.

Yeah, that's a good point that you bring up. What are you putting in your coffee? So are you are you using it as a vehicle to get sugar? So, you know, I don't know about you, but I put a little bit a half and half in my coffee.

I don't drink it with any sugar, but we all know that there's a huge market out there for fancy coffee drinks and they can be hundreds of calories. So that's also something for people to think about.

Are you drinking coffee for the caffeine? Are you drinking it for what? It's coming in the what? What in terms of like is it coming in a big fancy concoction?

And really, are you having a dessert for for coffee? Are you just drinking coffee? Yeah, that's exactly right. I think it's a little bit horrifying when you look at that, the number of calories in some of the drinks coming from Starbucks.

Up here, we have Caribou Coffee in Minnesota. But yeah, it can be the equivalent of a full on meal. Yes. I wonder if you have any advice for people who want to cut back on their caffeine intake.

How would you advise somebody to approach that? You know, there's not really any, you know, fancy protocol. But I would say with anything you, you know, taking a stepwise approach.

So if you say, gosh, I realize that I'm drinking six, eight ounces of coffee a day, will start by drinking five for a few days and then reduce it to get to 1 to 2 cups of coffee and also figure out, well, what am I using it for?

Is it just a habit? Could I substitute it with something else that doesn't have a whole lot of calories, cut coffee, doesn't have a lot of calories by itself, but do we have to drink it all of the time, all day long?

No, we could be substituting it for something else. That's that's one thing. Then there's a lot of there's a lot of substitutes on the market now that are touting lots of health benefits, like are the mushroom coffees that are or they're not even coffee, but they taste that coffee that certainly, you know, anything that could be helpful to your to use stopping the load of caffeine that you're getting is probably a win.

But they tend to be pretty cost costly. They're expensive, but there's there's a ton of substitutes out there that one could try that may give you that same flavor and feeling because a lot of what we take in and imbibe is really about the feeling associated with it.

Feeling cozy, having that warm drink, I like to recommend green tea and then there's actually a naturally sweet licorice tea. Do you know about this? I don't.

The the brand that I get it from is Yogi. And I think it's called Egyptian Licorice Tea comes in purple packs and it's delicious. You have to brew it for longer than you would like a black tea or whatever.

But it's an herbal tea. There's no caffeine in it and it's really tasty. So I know that sounds good. You should. Try it. I think it's awesome. You know, shifting gears to other substances for sleep and wake, sometimes people turn to the drugstore to help with sleep problems or even to feel more alert during the day, starting with the sleep aids.

How do you characterize what's available? Just over the counter. Yeah, there's so many medications that can induce sleepiness. So the one that I always think about is the brand name Benadryl or many versions of medications out there have what's called diphenhydramine, which is the generic name for Benadryl.

And those medications, you know, certainly if you're going to take it every once in a while, maybe, you know, it makes you sleepy. You're going on a plane trip and you know that you want to fall asleep.

I don't really see any problem with that.

Over-the-Counter Sleep Aids

It's when you start having to rely on something to help you get to sleep. And we know that Benadryl should not be taken long term. And in fact, it can cause what we call para sommeliers and people just like all of the other prescription medications that are used for sleep, it can be pretty dangerous.

It can cause some memory issues. I mean, these are these are problematic things that, you know, even though it's sold over the counter, it's not benign.

It has risk in taking something every single day. That's why everything you buy over the counter says if you're taking this for longer than seven days, please talk to your clinician.

And then there's a lot of medications that are combined. So there's Tylenol PM, there's Advil, PM, there's all of these these combined medications. And really, you know, you have to kind of take that step back and always ask yourself, why am I taking what I'm taking?

So am I taking this really for pain? Am I taking this for sleep? And less is more in my book. Yeah. And also kind of beefing up your sleep routines with healthy habits around sleep, taking time to wind down, incorporating some white space into your day so that you can offload that stress that causes a busy brain at night and interferes with sleep.

I think all of that is really helpful. Instead of just covering over everything over with a pill. Absolutely. And I couldn't agree more. And where I think that we have some work to do as a society to give us the the permission, if you will, to allow ourselves to prepare ourselves for sleep.

I'll often give people the analogy, you know, when we're hungry, we don't just open the refrigerator and start shoving food in our mouths. We know that we're hungry.

We take time to either prepare something or purchase something, but there's a waiting period. Well, that's kind of how I think our brains want to fall asleep.

They don't just say, go, go, go, go, go, go, go. Okay, hit the pillow. We have to prepare ourselves to go to sleep and we owe it to ourselves. We deserve to have that lying down period and kind of de-stress from the day, disconnect, if you will, from all of the devices that flutter our life throughout the day and and give ourselves that time to really relax and get ready for bed.

I really like that analogy because your antis are painting your hunger, you're anticipating your meals, and you're kind of taking steps to prepare for that.

And just like hunger, sleepiness can deserves the same sort of preparation. That's really great. Yeah, because sleep is food for the brain. Absolutely.

And there are other supplements out there. Supplements like magnesium, for example, l-theanine. Other things that you can buy from different companies that are sort of marketed as sleep solutions with a lot of different ingredients.

I'm curious to know how you advise patients around these types of questions about whether these supplements would be effective and worth the money. Right? Yeah.

A lot of times what people will come and and be a evaluated for sleep issues and they're taking a whole host of supplements. So what I often will tell folks is before you take a supplement, you first want to make sure that if you're taking any kind of prescription medication to make sure it does not interfere with the prescription medication, or if you have a chronic medical condition, make sure that you know the medication is going to be safe to take.

Again, supplements are largely they're not regulated in the United States. And we you know, it's a it's a caveat emptor. You have to be your own detective in terms of making sure that supplements are safe.

There's so much attractive packaging and marketing out there. It's easy to just grab something and say, Oh, this looks like it's going to work for me.

A lot of times supplements come in combination. It's rare to find just one supplement and a medic in a bottle.

Supplements and Evidence-Based Sleep Advice

And so I always will tell folks, okay, so before you take a medication, write down what your what what problem you're trying to solve. Write it down. Just jot down three things you want to happen because you're taking this supplement.

Then after two weeks, ask yourself those same questions, because if it's not helping, you need to stop it, not add more, not add a different supplement.

But you'll know after a couple of weeks whether or not this medication is working, the supplement is working. And certainly after a month, if you use it for an entire month, then you go back to your, you know, couple of things, three things that you are trying to solve.

And nothing has changed. Then that's your your clue to say, hey, I don't think I need to be spending money on this. A lot of people that I see in consultation will come to me.

Sometimes they're taking $100 or more of supplements and they don't know which which one is working. They don't know what any of them are doing exactly right.

And, you know, I think on some level, it feels good to kind of feel like you're taking control of the problem, you're paying attention to it, you're spending money on it.

But I like that plan of kind of comparing how your symptoms are before you're taking the supplement and then two weeks in and maybe even a month and to figure out if this is working or not.

And, you know, I was really amazed to find out that the supplement industry is $1,000,000,000 industry. One of my frustrations is when there's research touted on these different pills.

I find that research is a very loose term. I come from a basic science background where I'm like literally at the

bench and reading peer reviewed papers.

So this idea of research is something that I take seriously. How about you? Absolutely. That term research or approved or FDA, whatever, there's a lot out there that consumers just don't really know about what is truly researched, what does that mean when something has the FDA, you know, term on it?

What what does that all really mean? And I think that that's frustrating, especially for clinicians when we know that there's another side to the story around the marketing piece of these supplements that are out there.

And I, I'm very cautious about using any type of supplement or recommending this supplement because by and large, most of them just don't have a lot of concrete data or so still, the steps that we learn around clinical trials to feel confident in recommending something 100% totally.

And I think it's worth noting that a lot of the studies that use these supplements as kind of the test case are sponsored by the company that makes the supplement.

And so it is a very biased situation. Absolutely it is. And we do have to be careful because, again, we don't know what we're really getting in the supplement because there isn't that level of regulation.

So you could say that something exists in a bottle and it does not truly have to match what the label says. And I think that's really eye opening for for all of us, for for consumers that they don't realize that it could say so many milligrams on the label of the bottle, but it could be something completely different in the bottle.

Right, because nobody's checking. And so it's it's not doing anybody. A service now is there any supplements, to your knowledge, that have evidence based data showing that they help with sleep?

And my knowledge, I mean, there's there might be a few small trials. I can't think of anything that floats up to the top of my head right now, only because I don't really I've I've read about these supplements a long time ago and I haven't looked for any latest literature or seen any literature that's compelling enough for me to say, oh, we should absolutely be using this medication now in our practice to help people get to sleep.

Because I feel that really sleep is a behavior, a learned behavior, just like all the other behaviors that we teach ourselves. And ultimately, you want to get down to the core of what's causing your insomnia and retraining your brain around that component so that you don't have to rely on any medication to help you fall asleep.

Totally. And you know, one tip that I give people, if they do want to try a supplement, is to use a single ingredient preparation so that they know what they're getting and they can make a judgment about whether it works or not. Yes.

As we close, I wonder if you can tell people where to find you if they want to learn more or even work with you as a patient? Yes, absolutely. So I am in the Northwest.

I am a partner at the Oregon Clinic, which is in Oregon and Portland, Oregon. And I certainly I will see patients within the state of Oregon and Washington.

And if people want to reach out, I do have a Facebook group and I, I give tips and tricks on how to help yourself sleep in that group. Otherwise, yeah, I'm usually working in my practice.

That's great. Thank you so much, Dr. Matsumura, it was great to talk to you today. Thank you for having me.