OTHER CAUSES OF DAYTIME SLEEPINESS AND TIREDNESS

There are many medical conditions which can cause daytime tiredness and sleepiness. Iron deficiency, lack of thyroid hormones and other hormones, severe heart failure, liver failure and virtually any chronic debilitating conditions are known causes. Emotional problems such as depression can be associated with marked daytime tiredness, fatique and sometimes sleepiness. The use of medications to treat depression can be responsible for a sleep tendency and lack of energy during the day. However, once the above two groups have been excluded there is still a group of people who complain of severe tiredness and sleepiness. In this group abnormality of sleep/wake cycle and sleep disturbance can be responsible for the symptoms of tiredness and sleepiness. Virtually anything which disrupts the continuity of sleep brings about daytime tiredness. Sleep apnoea is a common condition. Shift working is typically associated with chronic lack of sleep and results in daytime tiredness.

Variant of Narcolepsy - Sleepiness of Central Origin.

The following are conditions which increase daytime sleepiness (hypersomnolence)

- post infectious hypersomnolence (excessive tiredness after an infection)
- -hypersomnolence associated with mood disorders
- -post head trauma hypersomnolence
- -hypersomnolence due to medications.

CHRONIC FATIGUE (Narcolepsy)



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Version 1. Author A. Ambrogetti March 2020

NARCOLEPSY

Often people with narcolepsy are not diagnosed for a long time. Some are labelled as lazy or a "sleepyhead". If the condition started in childhood they may have had difficulty learning and then difficulty keeping a job. Patients with Narcolepsy often have a history of car accidents as well as an increased risk of work related accidents. There is usually a long history of symptoms going back many years. Some people manage to put in place coping mechanisms. They try, for example, to take a nap as soon as an opportunity arises such as a lunch break or while sitting as a passenger in a vehicle.

Age of onset

The symptoms of Narcolepsy can start at any age from childhood up to old age. However, they usually start around the teenage years and in the 40's to 50's. The condition usually persists all through life.

Sleepiness/tiredness in Narcolepsy

A patient with Narcolepsy can have different degrees of daytime sleepiness/tiredness. The patient falls asleep for 10 to 20 minutes and then is able to resume their activities to full capacity. This may be repeated many times through the day. In other people however, the feeling is more one of sub-wakefulness during which the patient can fall asleep at any given time if given the opportunity. This often happens if the patient is engaged in boring activities such as driving, reading, watching television or a passenger in a car. Some people describe their feeling as a thick fog hanging over their head which they are unable to shake off. Some of these people can nap for 1 to 2 hours and still wake up unrefreshed.

Other Symptoms

1. Cataplexy

Sudden loss of power in any muscle group in the body can occur particularly during strong emotions like laughing or if a person becomes angry. This lack of muscle power is called cataplexy. At times it is described as a "jelly-like" feeling going through the body which can last from half a second to a few seconds. It becomes particularly obvious if it involves the leg muscles in which case the person has a feeling of buckling at the knees or ankles.

2. Sleep paralysis

Sleep Paralysis is also a symptom of Narcolepsy. This occurs usually when the person is going to sleep or waking up. The person is awake but has the feeling of being unable to move. This paralysis tends to end on its own after a few seconds, or can be terminated by a touch from another person. Sleep paralysis occurs also in people without narcolepsy.

3. Hypnagogic Hallucinations

A Hypnagogic hallucination is a dream which occurs when a person is half awake; just when a person is falling asleep there may be vivid, brightly coloured hallucinations. The abnormal feeling can be visual or auditory (hearing voices or noises) or even a feeling of abnormal body positions. A person with Narcolepsy can have one or more of the above symptoms.

TREATMENT

The person may not need any treatment at all if the symptoms are mild and they do not work in a high risk occupation. **Regular naps** through the day are a possible option which usually tends to improve sleepiness through the day. If this is not possible or if it is not sufficient, treatment with stimulant medications usually provides good symptomatic relief. There are four medications available in Australia, methylphenidate, dexamphetamine, modafinil and ar modafinil. The first two medications are amphetamine-like medications and require special approval for their prescription. Modafinil and armodafinil are non-amphetamine stimulants.

IThey are subsidised by the government with a special authority. They reduce the action of the contraceptive pill. An ECG is recommended before commencing treatment.

CHRONIC FATIGUE SYNDROME

Chronic Fatigue Syndrome refers to a persistent or relapsing and debilitating fatigue present for at least 6 months in the absence of obvious causes. Along with the fatigue the person may experience other symptoms including sore throat, muscle weakness, muscle pain, headaches, aches in the joints, memory and concentration deficits and sleep disturbance. A mild temperature, sore throat and tender nodes in the neck can also be present. Chronic Fatigue Syndrome can start acutely following what appears to be infective illness or can have a subacute onset.

Tiredness, Fatigue and Sleepiness

The distinction between physical exhaustion, sleepiness and lack of drive is not always clear. Often people use the terms tiredness and fatigue meaning a combination of all three. Often people regard sleepiness as a consequence of being tired and fatigued. Disturbance of sleep is very common in people with Chronic Fatigue Syndrome being reported in up to 71% of people. It is our experience that a group of people with Chronic Fatigue Syndrome have an abnormality similar to people with narcolepsy. This particularly applies to people in whom Chronic Fatigue Syndrome is severe and debilitating. Some of these people respond well to small doses of stimulant medication.