

# THE GOOD RELAXATION GUIDE

## DEALING WITH PHYSICAL TENSION

- Value times of relaxation. Think of them as essentials not extras. Give relaxation some of your best time not just what's left over.
- Build relaxing things into your lifestyle every day and take your time. Don't rush. Don't try too hard.
- Learn a relaxation routine, but don't expect to learn without practice.
- There are many relaxation routines available, especially on audio tape. These help you to reduce muscle tension and to learn how to use your breathing to help you relax.
- Tension can show in many different ways — aches, stiffness, heart racing, perspiration, stomach churning etc. Don't be worried about this.
- Keep fit. Physical exercise, such as a regular brisk walk or a swim, can help to relieve tension.

## DEALING WITH WORRY

- Accept that worry can be normal and that it can be useful. Some people worry more than others but everyone worries sometimes.
- Write down your concerns. Decide which ones are more important by rating each out of ten.
- Work out a plan of action for each problem.
- Share your worries. Your friends or your general practitioner can give you helpful advice.
- Doing crosswords, reading, taking up a hobby or an interest can all keep your mind active and positive. You can block out worrying thoughts by mentally repeating a comforting phrase.
- Practice enjoying quiet moments, e.g. sitting listening to relaxing music. Allow your mind to wander and try to picture yourself in pleasant, enjoyable situations.

## DEALING WITH DIFFICULT SITUATIONS

- Try to build up your confidence. Try not to avoid circumstances where you feel more anxious. A step by step approach is best to help you face things and places which make you feel tense. Regular practice will help you to overcome your anxiety.
- Make a written plan and decide how you are going to deal with difficult situations.
- Reward yourself for your successes. Tell others. We all need encouragement.
- Your symptoms may return as you face up to difficult situations. Keep trying and they should become less troublesome as your confidence grows.
- Everyone has good days and bad days. Expect to have more good days as time goes on.
- Try to put together a programme based on all of the elements in "The Good Relaxation Guide" that will meet the needs of your particular situation. Remember that expert guidance and advice is available if you need further help.

# **THE GOOD SLEEP GUIDE**

## **DURING THE EVENING**

- Put the day to rest. Think it through. Tie up "loose ends" in your mind and plan ahead. A notebook may help.
- Take some light exercise early in the evening. Generally try to keep yourself fit.
- Wind down during the course of the evening. Do not do anything that is mentally demanding within 90 minutes of bedtime.
- Do not sleep or doze in the armchair. Keep your sleep for bedtime.
- Do not drink too much coffee or tea and only have a light snack for supper. Do not drink alcohol to aid your sleep - it usually upsets sleep.
- Make sure your bed and bedroom are comfortable - not too cold and not too warm.

## **AT BEDTIME**

- Go to bed when you are "sleepy tired" and not before.
- Do not read or watch TV in bed. Keep these activities for another room.
- Set the alarm for the same time every day, seven days a week, at least until your sleep pattern settles down.
- Put the light out when you get into bed.
- Let yourself relax and tell yourself that "sleep will come when it's ready". Enjoy relaxing even if you don't at first fall asleep.
- Do not try to fall asleep. Sleep is not something you can switch on deliberately but if you try to switch it on you can switch it off!

## **IF YOU HAVE PROBLEMS GETTING TO SLEEP**

- Remember that sleep problems are quite common and they are not as damaging as you might think. Try not to get upset or frustrated.
- If you are awake in bed for more than 20 minutes then get up and go into another room.
- Do something relaxing for a while and don't worry about tomorrow. People usually cope quite well even after a sleepless night.
- Go back to bed when you feel "sleepy tired".
- Remember the tips from the section above and use them again.
- A good sleep pattern may take a number of weeks to establish. Be confident that you will achieve this in the end by working through "The Good Sleep Guide"!

*This guide has been adapted from material originally prepared by Dr Colin Espie.*

## ANXIETY DIARY

It will help us to find the best way to deal with the anxiety you are feeling at the moment, if you can keep an anxiety diary for a short time. Use it to keep a note of when and where you feel anxious, and how anxious you feel. The chart below is designed to make this as easy as possible. The best way to record how anxious you feel is by using an anxiety scale. On this chart the scale is 0-10, where 0 = not anxious at all, 5 = moderately anxious and 10 = extremely anxious.

By filling in the chart it will be easier to identify the times and situations where you feel most anxious. When you come back to see me, we can discuss what you have recorded in your anxiety diary. This should help us to decide together the best way to deal with the problem.

Name .....

Day, date & time	Where are you?	What are you doing?	Anxiety scale 0 - 10																						
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Adapted from original material in the report of the Scottish National Medical Advisory Committee on the management of anxiety and insomnia

## SLEEP DIARY

It will help us to find the best way to deal with the problem you are having with sleep at the moment if you can keep a sleep diary for a short time. All you have to do is to use the chart below to note down the pattern of your sleep (how much you sleep and when) and the quality of your sleep. It is best to try to fill in the diary as soon as possible after getting up; it only takes a few minutes. If this is not possible, make sure you fill it in before the end of the day — it is very difficult to remember details of sleep after more than one night.

When you come back to see me, we can discuss what you have written in your sleep diary. This should help us to decide together the best way to deal with the problem.

Name .....

### Measuring the Pattern of Your Sleep

1. At what time did you get up this morning?
2. At what time did you go to bed last night?
3. How long did it take you to fall asleep (mins)?
4. How many times did you wake up during the night?
5. How long were you awake during the night (in total)?
6. About how long did you sleep altogether (hours/minutes)?
7. How much alcohol did you take last night?
8. How many sleeping pills did you take to help you sleep?

	1	2	3	4	5	6	7
Day							

### Measuring the Quality of Your Sleep

Please answer these questions about the quality of your sleep using the following scale:

0    1    2    3    4  
 Not at all    Moderately    Very

	1	2	3	4	5	6	7
Day							

1. Do you feel well this morning?
2. How enjoyable was your sleep last night?
3. How mentally alert were you in bed last night?
4. How physically tense were you in bed last night?

## HELP WITH SLEEP

### INFORMATION FOR CARERS

- Older people need less sleep at night, particularly if they doze during the day.
- It is important to have a set time for getting up. The time for going to bed can be more flexible.
- It is normal for older people to awaken several times during the night. This is not harmful. Being awake does not necessarily mean that the individual is distressed. Resting in bed is almost as good as sleeping.
- A good night's sleep may follow a sleepless night, without the need to resort to a sleeping pill.
- Physical symptoms, especially pain, which disturb sleep should be treated in their own right.
- The doctor should be alerted to symptoms of anxiety or depression.
- A range of activities should be encouraged in order to maintain alertness and interest in life.
- Sleeping pills are addictive. They should only be used on occasions when they are really needed.
- Sleeping pills can have "hangover" effects the next day causing difficulty with concentration, dizziness, drowsiness, and falls.
- As a carer, you should feel able to discuss your own feelings with the doctor. You are entitled to periods of respite care to enable you to have a much needed break!

## Specimen Letters

*When planning to implement a withdrawal programme, the motivation of the patient is paramount. **Almost any intervention** can encourage some long-term users to reduce their medication. After chronic benzodiazepine users have been identified, they can be invited to attend for review, to discuss the possibility of reduction or withdrawal. A suggested text is provided below.*

Dear

I am writing to you because I note from our records that you have been taking ..... for some time now. Recently, family doctors have become concerned about this kind of tranquillising medication when it is taken over long periods. Our concern is that the body can get used to these tablets so that they no longer work properly. If you stop taking the tablets suddenly, you may experience unpleasant withdrawal effects. For these reasons, repeated use of the tablets over a long time is no longer recommended. More importantly, these tablets may actually cause anxiety and sleeplessness and they can be addictive.

I am writing to ask you to consider cutting down on your dose of these tablets and perhaps stopping them at some time in the future. The best way to do this is to take the tablets only when you feel they are absolutely necessary. In this way you might be able to make a prescription last longer.

Once you have begun to cut down, you might be able to think about stopping them altogether. It would be best to cut down very gradually and then you will be less likely to have withdrawal symptoms.

If you would like to talk to me personally about this, I would be delighted to see you in the surgery whenever it is convenient for you to attend.

Yours sincerely

*The aim of the report is to promote the non-drug management of anxiety and insomnia. However, there are a limited number of situations where prescribing a benzodiazepine is the most suitable course of action. In these cases, it may be useful to emphasise the advice given to the patient with a letter explaining why the prescription is short term. A suggested text is provided below.*

Dear

You have been prescribed ....., one of a group of medicines known as the benzodiazepines. This medicine can help you cope with a short period of severe stress; it is not intended for long-term treatment and can be habit forming.

If you are being treated for sleeplessness you will be given tablets for up to 10 nights only. Treatment for longer often makes sleep difficulties worse and may even make it difficult to stop the drug, so please do not ask for further supplies when these run out. Try to do without a sleeping tablet 1, 2 or 3 nights a week. Avoid drinks such as coffee, tea and cola after 3pm; these contain caffeine, which can keep you awake. Avoid late-night exercise and mental stimulation.

If you are being treated for anxiety you will be given a supply of medicine for a short period.

Avoid alcoholic drinks when taking a benzodiazepine, particularly when first starting treatment.

Do not drive or operate machinery while under the effects of these drugs.

Yours sincerely