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Hypersomnolence

Saisree Kondala¹

Abstract

Sleeping disorders are central disorders, related to neurological system characterized with severe daytime sleepiness despite of normal sleep time, with fatigue and anxiety issues. This disorder leads to cataplexy, sleep paralysis and hallucination during sleep onset and offset. These symptoms require both clinical and physiological treatment so that person known about the disorder, awareness, assessment and treatment and drugs used in therapy with histamine H3 antagonists and possibly GABA receptors. These disorders are diagnosed by different tests like multiple sleep latency test.

Keyword:

Cataplexy; Sleep Paralysis; Fatigue; Multiple Sleep Latency Test

Introduction

It is a sleep disorder also knows as hypersomnia, it is a state where individual feel sleepy all day long even after 7 hours of sleep at night, i.e. severe or excessive day time sleepiness. In research it's founded as 5-10 people are suffering out of 100 people with this disease. At 17-25 age group people are seen with sleep disorder. Hypersomnia is demonstration of central sleep disorder such as narcolepsy type 1 & 2, Idiopathic hypersomnia, recurrent hypersomnia also called as Kleine-Levi syndrome.

Conditions

It may be acute- lasts up to less than 2 months, sub-acute- lasts for about 3-4 months, or persistent- for more than 4 or5 months.

Symptoms

- Sleeping more than 9 hours and not feeling refreshed.
- Difficultly in being awake after once sleep get disturbed.
- Causes lot of dis interested in work and stress in work and daily activity
- Individual cannot stop falling asleep multiple times in day.
- Irritability and restlessness

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*Corresponding author: saisree kondala, Department of pharmacy, Andhra University, Vishakhapatnam, India. E-mail: saisreekondala.123@gmail.com

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- Difficulty in remembering and slow thinking.
- Loss of appetite and low energy.
- Anxiety issues.
- Feeling confused and aggressive after waking.

Factors Effecting

Major factor are stress, anxiety, trauma stress, depression, alcohol intake and maybe through genetics if it runs in their family or through some viral infections, other health related issues.

Treatment

- lifestyle changes like going to bed early by getting more sleep
- Eliminating alcohol and caffeine consumptions.
- Stimulants such as methylphenidate, modafinil, amphetamine-based stimulants, clarithromycin.
- Anti-depressants as second line therapy- fluoxetine, paroxetine, sertraline etc.
- Behavioral therapy by consulting doctor.
- Decreasing screen time, eating or drinking things before sleeping.
- Taking Scheduled Naps.
- Maintain sleep hygiene and keeping quiet environment making sleep comfortably.

Conclusion

World widely adolescents have inadequate sleep durations with major symptoms of hyper somnolence and insomnia with fluctuating over or under sleepiness associated with sleep disturbance and physiological disorders and stress, genetic, immunologic and biochemical abnormalities relating to narcolepsy types which are deficiency of orexins, a brief history is necessary for patients to identification and therapy understanding appropriately.

Author Affiliations

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Department of pharmacy, Andhra University, Vishakhapatnam, India

