# **Dyssomnia**

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Dyssomnias are a broad classification of sleeping disorders involving difficulty getting to sleep, remain sleeping, or of excessive sleepiness.

Dyssomnias are primary disorders of initiating or

### **Dyssomnia**

#### Classification and external resources

ICD-9-CM 307.47

(http://www.icd9data.com/getICD9Code.ashx?

icd9=307.47), 780.56

(http://www.icd9data.com/getICD9Code.ashx?

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**MeSH** D020920

(https://www.nlm.nih.gov/cgi/mesh/2017/MB cgi?

field=uid&term=D020920)

maintaining sleep or of excessive sleepiness and are characterized by a disturbance in the amount, quality, or timing of sleep.

Patients may complain of difficulty getting to sleep or staying asleep, intermittent wakefulness during the night, early morning awakening, or combinations of any of these. Transient episodes are usually of little significance. Stress, caffeine, physical discomfort, daytime napping, and early bedtimes are common factors.

# Major types of dyssomnias

There are over 30 recognized kinds of dyssomnias. Major groups of dyssomnias include:

- Intrinsic sleep disorders 12 disorders recognized, including
  - idiopathic hypersomnia,
  - narcolepsy,

- periodic limb movement disorder,
- restless legs syndrome,
- sleep apnea,
- sleep state misperception.
- Extrinsic sleep disorders 13 disorders recognized, including
  - alcohol-dependent sleep disorder,
  - food allergy insomnia,
  - inadequate sleep routine.
- Circadian rhythm sleep disorders, both intrinsic and extrinsic 6 disorders recognized, including
  - advanced sleep phase syndrome,
  - delayed sleep phase syndrome,
  - jetlag,
  - shift work sleep disorder.

## **Treatment**

In general, there are two broad classes of treatment, and the two may be combined: psychological (cognitive-behavioral) and pharmacological. In situations of acute distress such as a grief reaction, pharmacologic measures may be most appropriate. With primary insomnia, however, initial efforts should be psychologically based, including discussion of good sleep hygiene. Other specific treatments are appropriate for some of the disorders, such as ingestion of the hormone melatonin, correctly timed bright light therapy and correctly timed dark therapy or light restriction for the circadian rhythm sleep disorders. Specialists in sleep medicine are trained to diagnose and treat these disorders, though many specialize in just some of them.

# See also

- Somnolence
- Parasomnia
- Dyskoimesis

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Categories: Sleep disorders

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