Sleep Physiology and Connection to Chronic Disease States



Presented by Dr. Allison Brager Sleep Physiology Expert

Webinars made possible by the MedFit Education Foundation



About the Presenter

Dr. Allison Brager is an expert in sleep physiology and relevance to issues of mental health. She serves in several leadership and scientific advisory board positions with professional research societies, industry, and professional, Olympic, and collegiate teams.



She has over 30 publications in flagship

journals of medicine, neuroscience, and physiology widely featured by large media outlets and is author of the popular science book *Meathead: Unraveling the Athletic Brain*. She has a Sc.B from Brown University and a PhD from Kent State University.

Sleep Physiology and Connection to Chronic Disease States

Dr. Allison Brager Army Neuroscientist Author of Meathead: Unraveling the Athletic Brain

Disclaimer

The opinions herein are mine and do not represent those of the United States Army, the Department of Defense, or the United States Government

Why do we spend 1/3 of our lives asleep?

Two types of sleep in a 90 min cycle

- NREM (non rapid eye movement) sleep
 - deep sleep
 - 85% of total nighttime sleep
- REM (rapid eye movement) sleep
 - active brain in a paralyzed body
 - 15% of total nighttime sleep **dreaming

Functions of sleep

Rejuvenate (NREM sleep)

- heal up and store energy

Growth hormone, testosterone**

Learning and Memory (REM sleep)

 declarative (facts), episodic (events), procedural (motor)

Hours

8

More NREM, less REM

More REM, less NREM

Rejuvenation with NREM sleep



With sleep deprivation.....



Sleep to Perform (Growth Hormone)



Adapted from Spiegel et al. 2000

Sleep to Perform (Cellular Energy)



Plante et al. 2014

How is sleep regulated and how is it related to holistic health?





ORIGINAL ARTICLE

Effect of cognitive load and emotional valence of distractors on performance during sleep extension and subsequent sleep deprivation

Sara E. Alger^{1,*,•}, Allison J. Brager¹, Thomas J. Balkin^{1,2}, Vincent F. Capaldi¹ and Guido Simonelli¹

¹Behavioral Biology Branch, Walter Reed Army Institute of Research, Silver Spring, MD and ²Oak Ridge Institute for Science and Education, Oak Ridge, TN

*Corresponding author. Sara E. Alger, Behavioral Biology Branch, Walter Reed Army Institute of Research, 503 Robert Grant Ave, Silver Spring, MD 20910. Email: sara.e.alger.civ@mail.mil.





Daily activity

Mitochondria









Sleep Loss and the Inflammatory Response in Mice Under Chronic Environmental Circadian Disruption

Allison J. Brager[®], J. Christopher Ehlen[®], Oscar Castanon-Cervantes, Divya Natarajan, Patrick Delisser, Alec J. Davidson, Ketema N. Paul^{*}

Department of Neurobiology, Morehouse School of Medicine, Atlanta, Georgia, United States of America



Immunological effects of shift work in healthcare workers

SCIENTIFIC REPORTS natureresearch

Bette Loef^{4,2}, Nening M. Nanlohy³, Ronald H. J. Jacobi³, Chantal van de Ven⁴, Rob Mariman³, Allard J. van der Beek³, Karin I. Proper^{1*} & Debbie van Baarle^{3,5}

Sleep in the United States Military

Cameron H. Good¹, Allison J. Brager², Vincent F. Capaldi³ and Vincent Mysliwiec⁴



How to optimize nighttime sleep and waking performance?

How to maximize restorative sleep

1. Practice consistent sleep hygiene

2. Sleep timing matters

- Later to Bed: less NREM
- Earlier to Rise: less REM

3. Set "sleep goals"

- Sleep Diary (National Sleep Foundation)
- Wearables***

Time pre-bed	"Activity"
90 min	No more work
60 min	No more phone
30 min	Low level activity (dim)
0 min	Dark, cool room

Caffeine dosing strategies

	Optimal Caffeine	Energy Drinks:
Amount	< 200 mg/time	Monster: 240 mg
OPTEMPO < 24 h	4- 6 hours/ stop at 1800	Rockstar: 240 mg Bang: 300 mg
OPTEMPO > 24 h	4 -6 hours, as needed	

Military Culture

The military's obsession with energy drinks is contributing to PTSD, study finds

By: J.D. Simkins October 26, 2018



Napping strategies

Letter to the Editor

Challenging the stigma of workplace napping

Sara E. Alger^{*,}, Allison J. Brager and Vincent F. Capaldi

Behavioral Biology Branch, Walter Reed Army Institute of Research, Silver Spring, MD

"Why Should Someone Get Paid to Sleep on the Job?"

"I Don't Have Time to Nap. I Have Too Much Work." "You Must be Lazy if You Take Naps."

Scientists agree: Coffee naps are better than coffee or naps alone

By Joseph Stromberg | Updated Apr 23, 2015, 8:45am EDT

Now, caffeine doesn't block every single adenosine receptor — it competes with adenosine for these spots, filling some, but not others.

But here's the trick of the coffee nap: sleeping **naturally clears adenosine** from the brain. If

IT TAKES ABOUT 20 MINUTES FOR CAFFEINE TO HIT YOUR BRAIN

you nap for longer than 15 or 20 minutes, your brain is more likely to enter **deeper stages of sleep** that take some time to recover from. But shorter naps **generally don't lead to this** so-called **"sleep inertia"** — and it takes around 20 minutes for the caffeine to get through your gastrointestinal tract and bloodstream anyway.

So if you nap for those 20 minutes, you'll reduce your levels of adenosine just in time for the caffeine to kick in. The caffeine will have less adenosine to compete with, and will thereby be even more effective in making you alert.

Cost vs benefit of existing sleep/wake meds

							8				Sorti	din a				dives				
		Drug		Best USE Prove	besteen bedicate 12	nisof sle	Side Freets	Deptessart	, oslade AS	ness stres asset	consideration	ans sePotentia Back	Pot Warr	and cated	n Bleast will	Avold	Alcohol	Je Ref	stere with food	A Nedicine
	(re	ecommended dose)	Half Life	4° - 940	Oec. <	KO'	SID ON	PUL		Her.	Co. 42	, 418°	Pres	Pre-	x. 62	Parts	Phoo -	4102 ~	* 610	
	-Ċ-	ARMODAFINIL Nuvigil 150mg	~15 h	0	0				•		•		с	?					•	
	-ờ-	MODAFINIL Provigil 200mg	15 h		0				•		•		с	?					•	
7	, -ờ-	CAFFEINE*	~5 h	0	0		0				0		A	• ((
	C	MIRTAZAPINE Remeron 15- 45mg	20 - 40 h	•	0 0)	•	0	•	0	0	•	С	•	С				•	
	C	LORAZEPAM Ativan 0.5-2mg	~12 h	•	• C)	•	•	0	0	•	•	D	• (С				•	
7	7 (SUVOREXANT Belsomra 10-20mg	~12 h	•	• C)	•	0	•	•	•	0	с	? (C				•	
	C	ALPRAZOLAM Xanax 0.5mg	~11.2 h	•	• C)	•	•	0	0	•	•	D	• (С				•	
	C	TRAZODONE Desyrel 50-100mg	5-9h	•	0 0)	•	0	•	0	0	•	С	• (С				•	
	C	ESZOPICLONE Lunesta 1-3mg	~6 h	•	• c)	•	0	•	•	•	0	с	? (С				•	
	C	RAMELTEON Rozerem 8mg	1 - 2.6 h	•	0 0)	0	0	0	0	0	0	с	? (C				•	
	C	ZOLPIDEM+ Ambien 5-10mg	~2.5 h	•	• C)	•	0	•	•	•	0	с	• (С				•	
$\overline{}$	(ZALEPLON Sonata 5-20mg	~1 h	•	• 0)	•	0	•	•	•	0	с	• (Э				•	
	(MELATONIN* 0.3-3mg	30 - 50 m	•	0 0)	0	0	0	0	0	0	?	? (C	C) (0	

Highlighted medications



Caffeine: Enhances alertness, vigilance, and physical endurance Avoid > 200 mg at a time (no energy drinks!) to reduce tolerance



Suvorexant: Latest sleep medication for insomnia. Targets a specific brain pathway controlling sleep-wake transitions, reducing feeling of next-day drowsiness common of "Z" drugs



Zaleplon: A "Z" drug with a short-half life reducing possibility of nextday drowsiness. Ideal for helping to fall asleep after late night game/game day travel



Melatonin: Safe, effective, and ideal for game day travel to help readjust to new time zone

Concluding Remarks and Best Practices

- Lack of sleep is a crutch. Work smarter, not harder.
- Sleep smarter, not harder. Go to bed early. Utilize naps during high stress.
- Use caffeine strategically. No energy drinks!
- Don't be invincible. If you think you have a sleep disorder, get a sleep study.
- Questions? Ask me anything (@docjockzzz).