# Sleep and Headaches

Headaches and sleep issues often go hand in hand, with one condition leading to the other or vice versa. Individuals with headaches are two to eight times more likely to have sleep disorders compared to those without headaches. This connection is especially common in people with chronic headaches, occurring 15 or more days per month, compared to those with episodic headaches, which occur 14 days or less per month.

Research indicates that similar brain regions control both sleep and pain, and that inadequate or excessive sleep can trigger headaches, particularly migraines. Sleep can potentially alleviate a headache attack, while poor sleep may exacerbate an episodic headache into a chronic pattern.

Migraines and cluster headaches often occur during rapid eye movement (REM) sleep and can lead to lower levels of melatonin. Conditions such as sleep apnea and depression are common in individuals who wake up with headaches or migraines and suffer from sleep problems.

## Common Sleep Problems for People with Headaches

There are several common sleep problems among people with headaches. Those include:

*Insomnia* – The most common sleep issue for people with headaches is insomnia. Insomnia occurs when an individual has a difficult time falling asleep and/or staying asleep, waking up too early and not being able to get back to sleep, or not feeling refreshed when waking up.

*Obstructive Sleep Apnea (OSA)* – The second most common sleep issue for people with headaches is OSA which is when a person stops breathing for short periods while they sleep. This happens because their airway doesn’t stay open like it is supposed to. OSA is more common in men than women. You may have OSA if:

* ​you snore
* you feel very tired during the day
* someone has noticed that you seem to stop breathing during the night

Some risk factors for OSA are:

* obesity
* long-term use of alcohol, sedatives, muscle relaxants, or medicine with codeine or morphine

When OSA is diagnosed and treated, both OSA and headaches can get better. OSA is usually diagnosed with an overnight sleep study. Many people with sleep apnea must use a continuous positive airway pressure (CPAP) machine at night. The CPAP machine helps keep the airway open. If you think you may have sleep apnea, talk to your doctor, who may refer you to a sleep specialist.

*Other breathing problems* – Other breathing problems at night such as snoring and upper airway resistance syndrome (UARS) have also been linked to headaches. With UARS, the airway narrows and the lungs and diaphragm have to work harder. If UARS isn’t treated, it may turn into sleep apnea. Treatments for UARS include mouth splints, surgery, weight loss, and sleeping on the side instead of the back.

## Managing your headache could affect your sleep

Headache researchers Ong and Park [say other factors affect sleep according to the popular Biobehavioural Model](https://myhealth.alberta.ca/Learning/sleep-strategies/sleep-barriers/managing-your-headache). The model says that a person may already have issues (predisposing factors) like anxiety which, when combined with stress or daily hassles (precipitating factors), may cause short-term sleep problems. The person may then try to find short-term ways to cope (e.g., take naps, take sleep medicine at night, or use caffeine during the day). These ways of coping may become factors themselves (perpetuating factors), which can make sleep problems continue. This model may have special meaning for people with headaches. This is because some perpetuating factors are common ways to manage headaches, like:

* using caffeine to stop a headache
* napping during the day to sleep off a headache

If people aren’t careful, regular use of these strategies might lead to chronic sleep and chronic headache problems. A better solution is to learn ways to manage stress and to use sleep hygiene strategies.

## Ways to improve sleep and headaches:

There are many ways to improve your sleep patterns and, potentially, alleviate headaches caused by sleep issues.

Some examples include:

* Using a [headache diary](https://content.ca.healthwise.net/resources/13.8/en-ca/media/pdf/hw/form_aa164142.pdf) to find your triggers. Notice any patterns that occur in correlation to your sleep or how rested you feel
* Keep regular sleep patterns. Sleeping too much or too little can trigger headaches. If you do get a headache when your sleep pattern has changed, this may be a trigger that you can control.
* Manage stress. Exercise and eat nourishing food on a regular schedule.
* Seek treatment if you have depression or anxiety, which can both contribute to poor quality of sleep and headaches.
* Practice good posture to reduce neck strain. Reduce eye strain from computers at work and at home. Be mindful of jaw clenching, which can cause muscle tension in your face.

Visit [Headache Management: Sleep Strategies](https://myhealth.alberta.ca/Learning/sleep-strategies/sleep-barriers/managing-your-headache) or talk to your healthcare provider for more information on the correlation between headaches and sleep.

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