

## If an Attorney is Exhausted and Cannot Sleep Most Nights Due to Stress What Should they Do?

Question: Many nights, I'm exhausted but I can't sleep. Either I can't nod off at all, or I wake up in the middle of the night, my mind reeling with torts. Any advice?

**Answer:** Have you tried repeated viewings of Legal Eagles? Okay, seriously, you're not alone.

According to the National Sleep Foundation, upwards of 51 percent of Americans suffer insomnia several times a week, and a whopping 29 percent are plagued almost every night. Insomnia is not a disease but a symptom of another problem. Sleep experts classify insomnia as transient (once in a while), intermittent (repeated), or chronic (almost every night). Common causes include depression and anxiety; physical conditions such as arthritis, hyperthyroidism, and menstrual cramps; chemical side effects from caffeine, alcohol, nicotine, and certain prescription drugs; and disruptions of the sleep-wake cycle due to, say, jet lag. Repercussions can range from garden-variety fatigue and short-term memory loss to a propensity for traffic accidents and an increased risk of depression and heart disease.

Many lawyers and law students suffer transient and/or intermittent insomnia. They work until late at night. Then they can't understand why they can't just shut off their minds and immediately fall asleep.

• See Top 14 Ways Attorneys Can Avoid Burnout from the Stress of Practicing Law for more information.

If you want to try self-treatment, download a free "sleep diary" at sleepfoundation.org (also a great source for sleep specialists near you) and spend a week tracking your snoozing habits. You'll want to nix caffeine, nicotine, and alcohol, especially if taken late in the day. Exercise regularly, though not within two to three hours of bedtime, and make sure to unwind with at least an hour of quiet, relaxing activity before you attempt to retire. And use your bed for only two things: sleep and sex (if the latter is extremely strenuous, consider it exercise and refer to the earlier tip). Like Pavlov's dog, you'll soon be conditioned to expect only good things when you hit your mattress.

If you're still awake after 30 minutes under the covers, get up and do something relaxing until you're sleepier. Over time, automate your biological clock by retiring and waking at the same hours every day-weekends included. Getting up at 6 A.M. for work or school on the weekdays, then sleeping till 9 A.M. on the weekends, is like giving yourself jet lag without flying anywhere.

Still not snoozing? Sleep experts can work with you to help identify how your daytime habits affect your sleeping patterns (or lack thereof). Once spotted, problems can often be addressed through a form of counseling and behavioral modification called cognitive-behavioral therapy, an approach that can cut time spent staring at the clock by up to 50 percent. Sometimes the answer is quicker: drugs. Anxiety and depression sufferers often get relief from antidepressants. People with other clearly diagnosed temporary causes of insomnia, such as postsurgical pain (or an impending bar exam), can sometimes be candidates for hypnotics, including zolpidem tartrate (Ambien) and the recently approved zaleplon (Sonata). These appear to have far fewer morning-after side effects, such as drowsiness and lack of motor coordination, than the sedatives of yesteryear. See your doctor about a prescription.

Two caveats: Test-run any hypnotic long before a big meeting, trial, or exam to make sure it agrees with you. And be aware that sleep medication can send a powerful message to your brain that you can't sleep without it. Remember: Almost everybody alive occasionally suffers from transient insomnia. Stick it out. Relax and



think about how successful you'll be in the long run.

**Summary:** Many nights, I'm exhausted but I can't sleep. Either I can't nod off at all, or I wake up in the middle of the night, my mind reeling with torts.

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