Insomnia and Fatigue

What to expect... today, tomorrow and beyond

Steps for coping with the medical, emotional and practical concerns of breast cancer
Dear Friend:

You may have picked up this guide because you are coping with a new breast cancer diagnosis, going through treatment or figuring out how to move forward. Breast cancer can bring on complex emotions and fears, and you may feel so tired from treatments or stress that you have trouble getting through each day. Worrying about recurrence or how to keep up with your responsibilities may keep you awake at night.

This guide will help you understand how insomnia and fatigue related to cancer and its treatments impact your everyday life. It explains some reasons why you may feel sleepy or exhausted, gives tips on managing insomnia and fatigue, explores how and when to talk to a provider and shows you where to find support.

Sometimes talking to someone who has been there can help you cope with the challenges of breast cancer. Call our Survivors’ Helpline at (888) 753-LBBC (5222) for guidance, information and peer support. Our trained volunteers are here to listen and help you through this difficult period.

Warmly,

Jean A. Sachs, MSS, MLSP
Chief Executive Officer

All women pictured in this brochure are LBBC volunteers whose lives have been affected by breast cancer. We thank them for sharing themselves and their experiences.
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**Everyone’s journey is unique.**

If you have metastatic breast cancer, insomnia and fatigue impact your life in different ways.

Visit [lbcc.org](http://lbcc.org) or [advancedbreastcancercommunity.org](http://advancedbreastcancercommunity.org) for resources created just for you.
Looking at Insomnia and Fatigue

No matter where you are in your breast cancer journey, cancer can impact your everyday life. Like many women, you may accept fatigue and sleeping problems as natural results of breast cancer. The thought of talking about your sleep patterns in detail with your healthcare team may feel overwhelming.

More and more providers are talking about insomnia and fatigue. Still, some cancer doctors may not focus on these issues.

Persistent or long-term sleeping problems can impact your life in many ways. Poor quality sleep affects your self-esteem, mood, emotions, relationships and work. It gets in the way of your ability to think clearly, take care of yourself and your family, socialize and more. Family, friends and co-workers may not understand your situation and expect too much of you. Finding the words to describe how you feel may be challenging or frustrating.

If you feel tired, it is important to talk with your healthcare provider. Just because you have cancer does not mean you must put up with being tired all the time. Doing what you can to ensure good quality sleep is an act of self-care that helps you handle everyday stresses and traumas. Lifestyle changes, medicines and complementary therapies are ways to help you manage insomnia and fatigue.

“Fatigue had me dozing off all day long. Sometimes I didn’t even know it until my children had told me. I would be sitting on the sofa enjoying a conversation, and next thing you know, my children would tell me I just slept through the rest of the conversation.”

—Sarah
Understanding Fatigue

Fatigue related to cancer or its treatments is a constant feeling of tiredness or exhaustion unrelated to recent activity. This exhaustion interferes with your ability to function normally. Fatigue makes you feel tired, weak, sluggish, exhausted or drained. You move more slowly than usual or need help getting around. A night’s sleep no longer brings energy.

Short-term fatigue lasts for days or weeks and is related to your lifestyle. The persistent fatigue associated with cancer and its treatments is different. Cancer-related fatigue lasts for long periods of time and takes away your energy to do even the easiest everyday tasks.

Fatigue is common during active treatment, and it may begin to improve several weeks or a month after treatment ends. It can take as many as six months to one year for you to feel that you have your energy back. Some women have long-term fatigue after treatment.

10 PRACTICAL WAYS TO SAVE ENERGY

1. Take short naps of less than 30 minutes.
2. Order takeout instead of cooking meals at home, or cook in bulk and freeze meals when you feel lively.
3. Have your groceries delivered or ask a friend or family member to pick up groceries for you.
4. Stick to nutritious foods with protein and complex carbohydrates. Make sure you eat breakfast every day and drink lots of liquids.
5. Carpool with co-workers instead of driving yourself.
6. Schedule meetings for the time of day when you feel most energetic. Keep a diary for a couple of weeks to track your energy levels.
7. When you do physical work, move your chore to a place you can sit. Sit while dressing; take a bath instead of a shower or use a shower chair; put a stool by the kitchen sink; or prepare dinner at the kitchen table. Move things around your house to prevent a lot of up-and-down and bending. Place chairs so you can sit when you need to sit.
8. Work in a cool, well lit room. Use fans when air conditioning is not available.
9. If you have children or grandchildren, try quiet activities that allow you to sit, such as reading, building blocks or playing board games.
10. When sitting still or resting, have a cooler nearby with liquids and healthful snacks so you can get what you need without making trips to the kitchen.
Sleep Problems Before Breast Cancer

Fatigue and insomnia are common, even without breast cancer. Sometimes having a busy, fast-moving life with little time to sleep exhausts even the healthiest person.

Before breast cancer, you probably felt tired after a long day of work, a workout at the gym or days of caring for your children or aging parents. But napping, taking a day off or getting a good night’s sleep helped you feel better. After breast cancer, a night’s rest may not be enough to help you feel rested. No matter what you do to take care of yourself, you may still feel tired.

If you had sleep problems before breast cancer, talk to your healthcare provider. You could have a sleeping disorder or chronic insomnia unrelated to breast cancer. Illnesses such as low thyroid function, heart disease and anemia (a low red blood cell count) can cause fatigue. Your sleep problems could be caused by emotional issues or medicines you take for other illnesses.

If your sleep troubles began at diagnosis or when a certain treatment began, they most likely are related to breast cancer or treatment. Breast cancer-related insomnia and fatigue could impact your life after treatment ends. If you get into a pattern of not sleeping, you may be unable to break the cycle.

Cancer-related fatigue and insomnia are very treatable, even without the use of medicines. Many factors can cause sleeping problems in people with cancer, and it can be challenging to find a single cause. Looking for causes will help you and your healthcare team figure out ways to help you maintain your energy.

Symptoms of Insomnia

The sleep disorder insomnia is associated with fatigue. With insomnia you have trouble falling asleep or staying asleep three or more nights a week over a long period of time.

When dealing with the stress of cancer and its treatment, it is normal to have a night or two of restless sleep. This can be unpleasant and annoying and make you feel tired during the day, but it normally goes away on its own. With insomnia, you have trouble sleeping most nights. You lie awake in bed for hours without sleeping, or you fall asleep quickly but wake up during the night and have trouble falling asleep again. You rarely feel refreshed and well rested when you wake.

Insomnia makes it hard to concentrate, stay awake during the day and finish daily activities. It impacts your body’s ability to fight infection and increases your risk of developing anxiety, sadness and depression.

If this sounds like your experience, then you may have clinical insomnia that you should discuss with your treatment team.
Causes of Breast Cancer-Related Insomnia and Fatigue

Your Lifestyle

If you always had poor sleeping habits, the impact of cancer could make them worse.

Your troubles with sleep could be connected to going to bed and waking up at different times each day; drinking coffee, tea or other caffeinated beverages at night; and doing other lively activities like watching horror movies or exercising before bed. Drinking alcohol before bed may seem like a good way to help you fall asleep, but it only works at first and keeps you from getting the deep sleep you need to feel well rested. Continuing these habits now could cause even more sleeping problems.

Your Emotions

You had much to do before breast cancer, whether as a student, a worker, a mother or a caregiver. Staying up all night worrying about how to keep up with life demands has been linked to insomnia.

Breast cancer can be traumatic. Even with support, you may feel nervous, anxious, sad, depressed, fearful or overwhelmed. Anxiety often increases as you make treatment decisions. You may worry about what is going to happen to you or how your family will cope. Concern about pain or side effects or fear of upcoming treatments, exams or test results increases sleeplessness. Sometimes just worrying about being able to get enough rest can keep you awake. All these feelings are normal, but they can make you feel very tired or keep you from falling asleep.
Your Treatments and Side Effects

After treatment ends, worries about recurrence and not seeing your providers as often as before may leave you feeling you lack support. These feelings can impact sleep and increase fatigue. Make sure you discuss your reactions with your healthcare team.

Sometimes people feel so sad that they have trouble enjoying things that normally make them happy. They may even feel unable to get out of bed. If your emotions prevent you from doing everyday tasks, you may have anxiety or depression. Clinical depression is a medical condition and is not a sign of weakness. It may slow down your recovery and lead to other problems. Share your feelings with your healthcare team so they can recommend treatment.

We invite you to visit lbbc.org to order a free copy of our Guide to Understanding Your Emotions and Guide to Understanding Fear of Recurrence. Consider calling our Survivors’ Helpline. Our volunteers are here to listen, and they can guide you to resources to help you cope.

Insomnia and fatigue often are triggered by the impact of treatments and medicines on cells, hormones and your physical comfort. Fatigue is common during radiation therapy. Chemotherapy medicines make it harder for your bone marrow to produce red blood cells, which carry oxygen through the body to cells and tissues. Having fewer red blood cells than normal is known as anemia. If your cells aren’t getting the oxygen they need, your body may feel very tired.

If you feel nauseated all the time or vomit or have diarrhea, you are losing fluids and electrolytes (salts and minerals in the blood) that help maintain your energy. Pain and breathing problems are common causes of insomnia. If you lose your appetite, are constipated, have mouth sores or otherwise feel unable to eat, you may not be getting enough nutrients. Your energy level can be affected by pain, infection or weight changes. Talk to your healthcare team if you have any of these symptoms or side effects.

No matter what age you are, menopausal symptoms can affect your sleep. Some treatments stop the ovaries from working for a while or forever. Hormonal therapies that shut down all estrogen production cause hormonal changes that can make you tired. Changing estrogen levels impact hot flashes, night sweats, mood, sleep and daily functioning. Treatment with hormonal therapy can last many years, so it is very important to talk with your doctor about your concerns as soon as you notice a problem.
Taking medicines for side effects can lead to a cycle in which medications that help some symptoms cause others. Antidepressants and anti-nausea and pain medicines can cause fatigue. Steroids given before treatment to reduce nausea or allergic reactions (common with taxane chemotherapy) can interfere with sleep. Even medicines for anxiety can add to feelings of fatigue. Your healthcare provider can help you figure out ways to balance the benefits of these medicines with the risks.

Fatigue can be caused by low activity levels or resting for long periods while recovering from surgery or chemotherapy treatments. If you stay in the hospital, your sleep will be interrupted often. Returning to a normal pattern at home may take time.

Pain and Your Sleep

You are not alone if you have ongoing pain or pain that comes and goes. Sometimes aromatase inhibitors bring on hand stiffness, discomfort and joint pains. In a few cases, arm pain begins after breast surgery or surgery to remove the lymph nodes.

Pain contributes strongly to sleep problems. You may find yourself in a cycle of feeling pain, not being able to sleep, becoming fatigued from not sleeping and being kept awake with worries about pain.

Many medicines can help you manage pain during cancer treatment. Some cause tiredness, so sometimes you face the difficult choice of fatigue or constant pain. Your healthcare provider can help you find medicines to balance pain management with your energy level. If the first medicine does not meet your needs, do not be afraid to ask for other options.

“The more anxiety I felt, the harder it was to get pain under control. The cycle of pain, insomnia, fatigue and anxiety was one of the worst experiences I have ever had—much worse than the cancer or surgery itself.”

—Nanette
Being patient with yourself and others may seem impossible when you feel tired all the time. Especially during treatment, working toward good sleep habits can be difficult.

Give yourself permission to feel tired. You are going through something traumatic for your body and your mind. To get through each day, take steps to improve your sleep schedule and exercise habits. Find ways to save your energy.

**Improving Your Sleep**

Changing your habits can help improve your sleep. Researchers have found that changing your sleeping habits has longer lasting impact and is as effective at fighting chronic insomnia as sleep medicines.

Make sleep a priority, and set aside seven to nine hours for sleep each night. Use your bed for sleep and intimacy only; avoid working, eating or watching television in bed. Go to bed at the same time every night.

Start a routine to follow before bedtime. Allow yourself at least a half hour to wind down before going to bed, and go to bed only when you feel sleepy. Do not spend long amounts of time in bed not sleeping, because your body will associate the bed with tossing and turning rather than sleep. Instead, after 20 minutes of not sleeping, get out of bed and go to a restful place to relax or read with a dim light. Return to bed when you feel tired. Repeat this process as many times as you need. Make sure to get out of bed at the same time every day.
Power Napping

“Power naps” give you the boost you need to make it through the next important task or event. These naps of 30 minutes or less, taken early in the day, give you rest but won’t put you into a deep sleep, which can make it harder for you to fall asleep and stay asleep at night. After a power nap, you may feel groggy at first but better within the next half-hour. Set an alarm clock to control the length of naps.

Exercise

“I suffered from insomnia during my entire treatment. I tried drinking chamomile tea, reading and using aromatherapy candles. I then decided to start taking short walks when I felt well enough, and that helped a lot.”

—Asia

Regular, low-intensity exercise prevents and improves fatigue caused by treatment. Exercise also helps you sleep more soundly and can even improve your outlook.

Exercise need not cost much or take a lot of time. Start with a 20-minute walk each day. Walk as briskly as you can. By night, this small amount of exercise will help you to fall into a deep sleep and stay asleep.

Other types of exercise depend on your body and physical needs, so it’s best to ask your healthcare provider before you start. Ask to be referred to a physical therapist or cancer rehabilitation program before treatment begins. A physical therapist, rehabilitation medicine specialist or a physiatrist specializing in people with cancer can help create a safe and effective exercise routine for you.

If you already exercise, try to keep your usual routine, if possible, during treatments. Once treatment begins, exercise at an intensity level that is comfortable for you. If you can, walk or exercise every day. When you cannot walk your usual 20 minutes, start with five or six minutes. When you feel ready, add a few minutes more. As you gain more energy, aim for a 20-minute walk several days a week. Finish walking two hours before bedtime so it doesn’t prevent you from falling asleep.

Try not to go more than two days without exercise. When you feel very tired, try a slow exercise such as yoga or tai chi to relax your mind.

Follow these rules of thumb during treatment:

- Start with low-intensity exercise for up to 20 minutes, such as slow walking on flat ground or riding a stationary bike.
- Include a five minute warm-up and cooldown. Stretch and start your workout slowly.
- Stop exercising if you feel short of breath, chest pain or discomfort.
- Share your exercise routine with your healthcare provider.
**Menopause and Your Sleep**

If you have menopausal changes, your sleeping patterns may change. Hot flashes and night sweats prevent falling asleep quickly or wake you during the night. Mood changes, anxiety or depression make you fatigued or unable to sleep at night. These side effects can be very frustrating.

To lessen the impact of hot flashes, try these tips from LBBC volunteers. Avoid spicy foods, and wear comfortable, loose-fitting cotton clothes to bed. Sleep on cotton sheets. Keep a cool pack by your bedside table to put on your forehead. Make sure your room is cool at night.

Studies have shown that some antidepressants are useful for treating menopausal symptoms but may disrupt your sleep in other ways. These medicines also help manage the emotional impact of cancer. To learn more, talk to your healthcare provider. Always mention other medicines you take, especially hormonal therapies such as tamoxifen.

**Maintaining Your Energy**

“My most difficult struggle was trying to get chores done. I seemed to manage this better by rearranging my schedule. I would do laundry and housework right before my next chemotherapy treatment, because after the treatment I would just feel so drained and exhausted.” —Sarah

“I had a great neighbor who cooked dinner for me every night, so I could rest when I got home from work.” —Mimi

To save energy during treatment, you may need to make choices about how you spend your time. It may not be realistic to do everything you did when you felt well. Think about which of your regular responsibilities is important for you to do yourself.

When you can, ask for help. Family and friends may not be sure what to do. Let them know what you need—chances are they will feel honored that you asked. If you have older children or grandchildren, encourage them to take on household chores if they are ready. Try to perform as many non-strenuous daily activities as possible. Schedule errands for a time of day when you have more energy, and limit trips out to once a day if doing more exhausts you.

Prioritize your life so you have energy for the things you value most. If you love going to a class or want to attend a child’s performance, schedule a nap beforehand. Order takeout instead of cooking, or ask family members, co-workers or friends to help with household chores and making food. A great way to organize caregivers is through our Lotsa Helping Hands service at lbbc.lotsahelpinghands.com.

During active treatment, consider changing work schedules, limiting hours or taking a leave of absence. Ask your healthcare team or social worker to help you write a letter to your employer.
Getting Support

Sometimes talking to other women or joining a support group can help you connect with others who have fatigue or insomnia. They may even have ideas to help you manage what you are going through. Call the LBBC Survivors' Helpline at (888) 753-LBBC (5222) to talk to someone who has been there.

If you think your emotions may be causing sleep problems, your healthcare team can help. Get a referral to a social worker or mental health provider to find ways to work through your feelings. A doctor may prescribe medicines to help you manage your emotions, maintain your energy or sleep soundly at night.

“When I was fatigued due to insomnia, I cried easily and got angry easily. Life seemed insurmountable. I made mountains out of molehills.”

—Nanette

Relaxation Techniques at Home: Progressive Muscle Relaxation

- Sit or lie down on a comfortable chair, couch or bed.
- Turn on relaxing music and adjust the lighting to a level you consider peaceful.
- Begin to take deep breaths at an even pace. Breathe in through your nose and out through your mouth. Your breaths should be deep enough to make your stomach rise.
- Starting with the muscles in your feet and working upward, tense each muscle group for several seconds, then relax. If a part of your body is injured, skip that area. Continue breathing deeply.
- After you tense and relax the muscles throughout your body, lie still for a few minutes.
- Slowly begin to become aware of your surroundings. Remind yourself of the feeling of relaxation throughout the day.

At Your Desk or While You Receive a Treatment

- As you breathe in slowly, count up to three.
- As you exhale, count down from three. Breathe in through your nose and out through your mouth.
- Focus on your breathing and counting. Repeat several times.
- When you finish, notice any differences in how you feel. Repeat throughout the day when you need to relax.
Your healthcare team should be screening you for signs of insomnia and fatigue early on, during treatment and beyond. By screening you early, your team can suggest therapies and track whether they work for you. If fatigue is interfering with your daily life and your doctor doesn’t mention it, you should bring it up.

Before your appointment, think through your medical and treatment history. Be prepared to answer questions about your sleeping, eating and exercise habits and any emotional changes since treatment began.

Be as open, clear and descriptive as possible so your team can find the best ways to help you:

- Rate how tired you feel on a scale of zero to ten, zero being no fatigue, ten being the most exhausted you have ever felt. Describe problems falling asleep, staying asleep, waking too early, being unable to fall asleep again or a combination of these problems.

- If you can, keep a calendar of changes in your fatigue or insomnia. Do they vary throughout the day or by the day of the week? How do they relate to your treatment days, physical activity or other events?

- Tell your healthcare team how fatigue interferes with your life and what activities you stopped since it began.

- Let your doctor or nurse know if you cannot keep up with your treatment because of insomnia and fatigue.

- Make sure to mention pain or shortness of breath during exercise.
ONCOLOGY NURSE
You will spend a lot of time with your oncology nurse during treatment. Nurses can help you identify what triggers sleep problems and find resources for managing them.

SOCIAL WORKER OR MENTAL HEALTH PROVIDER
Discussing your emotional concerns with a mental health provider may help you make sense of and begin to understand your fears and anxieties. Mental health providers find ways to manage your fears and recommend relaxation techniques to help with sleep. They also help you find ways to talk with your healthcare team. They can evaluate whether your sleep problems come from a serious medical condition, like clinical depression.

Sometimes you get so worried about going to sleep that those thoughts alone keep you up. Some mental health providers, such as psychologists, have special training in sleep disorders. They use cognitive behavioral therapy, which teaches you how to improve your sleep habits and focuses on reducing thoughts that make sleep problems worse. Health psychologists help you become more aware of how your body responds to stress so you can better manage your reactions.

“I got support from my oncology nurse. She could tell how I was feeling by just talking to me, and I could ask her questions I didn’t feel comfortable asking other people.”
—Rose

Who on My Healthcare Team Can Help?

ONCOLOGIST
Reporting sleep problems to your doctor is very important because your treatment could be causing them. Oncologists can decide whether treatment should be changed or prescribe medicines to manage sleep problems. They also can refer you to another specialist. If you have a long-standing sleep problem, your oncologist may recommend a visit to a sleep center that focuses on sleep problems.
A wonderful nurse practitioner put me on an antidepressant known to improve anxiety and gave me medicines to help me sleep. I finally slept through the night. I have now weaned myself off of everything except the antidepressant, and I take an over-the-counter sleep aid. I am so much happier and now ready to take on whatever life hits me with.”

—Nanette
Paying for Treatment

Before you begin any type of treatment for insomnia and fatigue, it is best to talk with your healthcare provider, social worker and insurance company about costs. Ask about the difference in coverage and costs between generic and brand name medicines.

Your social worker can talk with you about the benefits of your prescription plan. Ask for help in making a list of places to call to get answers to questions or to find solutions to financial problems. When you decide on treatment, call your insurance company to find out whether it covers medicines to treat insomnia and fatigue.

If you do not have insurance, your social worker or nurse can help you find out about patient assistance programs that help cover treatment costs. You may also consult our Guide to Understanding Financial Concerns.

Medicines for Insomnia and Fatigue

Sleep medicines have not been studied in people with cancer, but while you are in treatment, they may be one of the best ways to help you cope. Medicines that doctors sometimes use to manage fatigue include benzodiazepines, antidepressants, medications for anemia, stimulants and antihistamines.

Your doctor may prescribe benzodiazepines, which help you to relax. Stimulants provide energy and boost your ability to focus. Antihistamines, found in many over-the-counter sleep aids, may help you for a short time.

Sleep medicines may improve or impair wakefulness during the day. They can interact with other pills or cause anxiety. Always talk to your doctor before starting any new treatment, prescribed or over-the-counter.

In a pinch, a caffeinated drink such as coffee, tea or soda may help you feel more alert for a couple of hours. Remember that caffeine can make you feel more tired later, or it could keep you awake when you’re ready to sleep. If you want to try supplements or herbs, talk to your healthcare team first to make sure they won’t interact with other treatments. Visit mskcc.org/AboutHerbs for more information.

Use sleep medicines cautiously, because in time they can disrupt regular sleep patterns. Side effects include dependence, mild memory loss and daytime drowsiness. Medicines not in the benzodiazepine family are less likely to cause dependence and have fewer side effects. In most cases, though, if taken correctly and under your doctor’s care, sleep medicines can be helpful and safe during treatment.
“I didn’t develop the severe fatigue, anxiety and insomnia until I was well on my way to recovery. My prognosis was excellent. I was healing well. It was time to get back to my normal life. I could never pinpoint why I was such a mess.”

—Nanette

You may continue to have insomnia and fatigue after treatment is over. On your regular visits to your doctor, update your team. They can help identify the causes and recommend ways to lessen sleeping problems.

Worries about cancer recurrence, follow-up tests and appointments often cause insomnia and fatigue to reappear. Even if you never had problems with sleep, the stress of oncology checkups may cause sleeping problems. Talking to a mental health provider who helps people with cancer deal with lingering emotional concerns is important for your well-being and for managing some sleep problems.

Healthcare providers do not have a lot of information on treating insomnia and fatigue in people with cancer because the topic has not been widely studied. Information is needed on how cancer, cancer treatment and cancer-related anxiety and depression affect sleep in the years after treatment ends. Taking part in a clinical trial is a great way to help us learn more.
10 WAYS TO QUIET THE MIND AND PREPARE YOURSELF FOR SLEEP

1. Eat a light protein snack several hours before bed.

2. Turn off your cell phone, pager, e-mail and other gadgets. If it doesn’t distract you, wear your iPod to bed. Find music for stress management and relaxation.

3. Avoid bright lights on computers or televisions right before you turn out the light to go to bed.

4. Keep the bedroom cool.

5. Watch a relaxing television show (not the news) or listen to music.

6. Wear comfortable, loose-fitting clothing.

7. Make sure your bedding is comfortable and the fabrics do not irritate your skin.

8. Meditate to relax your mind.

9. Try abdominal breathing.

10. Experiment with progressive muscle relaxation (see page 22).

“I still have problems with insomnia. My main goal is to have peace and positive individuals around me. If there is confusion, gossip, fighting or negativity going on, I try to remove myself from it.”

—Asia

Restoring good sleep patterns can improve your overall health and the quality of your everyday life. In the long term, getting good sleep reduces your risk for developing other medical conditions. You never should feel ashamed or afraid to ask for help, even if you finished treatment. Many women can identify with your feelings, and talking openly helps us find ways to improve your life.

Living Beyond Breast Cancer was created to address your need for support after treatment ends. Today we focus on all stages of diagnosis, treatment and recovery to help you find information you can use to take care of yourself and your family. If you need information or just want to talk to someone who has been there, call our Survivors’ Helpline at (888) 753-LBBC (5222). Our volunteers provide support and guidance; many experienced what you are going through right now. We are here for you when you need us.
Here is a list of places to find out more about insomnia and fatigue. This list is not all-inclusive, and many other groups have resources that may help you.

Information is current as of December 2010 but may change.

**Sleep Organizations**

**American Academy of Sleep Medicine:**
(708) 492-0930, sleepeducation.com

**National Sleep Foundation:**
(202) 347-3471, sleepfoundation.org

**Groups with Information on Cancer and Sleep**

**American Cancer Society:**
(800) 227-2345, cancer.org

**American Society for Clinical Oncology:**
cancer.net

**Breastcancer.org:**
Breastcancer.org/tips/fatigue

**National Cancer Institute:** (800) 422-6237, cancer.gov/cancertopics; search for “sleep”

**Susan G. Komen for the Cure:**
(877) 465-6636, komen.org
More Resources

Visit lbbc.org or call (610) 645-4567 to order our other Understanding publications:

- Guide for the Newly Diagnosed
- Bone Health
- Breast Cancer Treatment Research Studies
- Emotions
- Fear of Recurrence
- Financial Concerns
- Insomnia and Fatigue
- Las Decisiones de Tratamiento
- Lymphedema
- Treatment Decisions
- Triple-Negative Breast Cancer

Coming soon:
- Hormonal Therapies
When you are ready, we encourage you to call our **SURVIVORS' HELPLINE** at **(888) 753-LBBC (5222)** for guidance, information and peer support about insomnia, fatigue or any other breast cancer concern. Our national, toll-free service is staffed by trained volunteers affected by breast cancer. Spanish-speaking Helpline volunteers are available.

**What to expect... today, tomorrow and beyond**

Steps for coping with the medical, emotional and practical concerns of breast cancer

**Insomnia and Fatigue**

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National Philanthropic Trust

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