



Sleep, Dreams, &  
Sleep Hygiene:  
A Guide to Getting  
a Good Night's Sleep!

Second Edition

Christopher A. Perry, MA



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A Foot Bridge, North Wales, 1830-1840 by Richard Sebastian Bond

At Festiniog, North Wales, 1835 by Samuel Palmer, also spelt Ffestiniog, as in Blaenau Ffestiniog

Skelwith Force, Westmorland, 1800-1820 by Robert Hill

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### **Grace Counseling Clinic**

Email: [gracecounselingclinic@gmail.com](mailto:gracecounselingclinic@gmail.com)

# Sleep, Dreams, & Sleep Hygiene: A Guide to Getting a Better Night's Sleep!

Christopher A. Perry, MA

“Men are disturbed, not by things, but by the principles and notions  
which they form concerning things.”<sup>1</sup>

- Epictetus

6 Many are saying, “Who will show us anything good?”  
Lift up the light of Your face upon us, Lord! 7 You have put joy in my heart,  
More than when their grain and new wine are abundant.  
8 In peace I will both lie down and sleep, For You alone, Lord, have me dwell in safety.

- Psalm 4:6-8

It is futile for you to rise up early, To stay up late, To eat the bread of painful labor;  
This is how He gives to His beloved sleep.

- Psalm 127:2

Sleep and watchfulness, both of them, when immoderate, constitute disease.<sup>2</sup>

- Hippocrates

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<sup>1</sup> Epictetus, *The Enchiridion*, 5. Translated by Elizabeth Carter Source: <https://classics.mit.edu/Epictetus/epicench.html>

<sup>2</sup> Hippocrates, *Aphorisms*, 7.72. University of Chicago Perseus Project. Source: <https://anastrophe.uchicago.edu/cgi-bin/perseus/citequery3.pl?dbname=GreekNov21&getid=1&query=Hipp.%20Aph.%207.72>

## INTRODUCTION

The essential disciplines of a healthy lifestyle are eating a whole food diet with proper hydration, exercise, sleep, and meaningful relationships with healthy boundaries. Without these disciplines a plethora of spiritual, mental, and physical illnesses and disorders will overtake our lives. This guide will us focus how to get a good night’s sleep. Sleep is a “biological need for human beings.”<sup>3</sup> More technically, “Sleep is a restorative process that is brain state-regulated, reversable, homeostatic, embedded in both a circadian and social-physiologic organization of perceptual disengagement and elevated arousal thresholds.”<sup>4</sup> Because we sleep for about one-third of our lives, unhealthy sleep and sleep patterns is directly related to a host of mental and physical disorders.<sup>5</sup>

## SLEEP DEPRIVATION AND RISK

Are you tired yet? Lisa Feldman Barrett, PhD, posits 40 percent of Americans between the ages of thirteen and sixty-four are regularly sleep-deprived, a condition that can lead to chronic misbudgeting of emotions<sup>6</sup> as well as depression and other mental illnesses.”<sup>7</sup> Adults with good vagal tone (health in both the sympathetic and parasympathic vagal pathways) have the ability to experience intense emotions without becoming physically or emotionally aggressive or emotionally withdrawn and pouty.<sup>8</sup> When we are sleep deprived and experience the corollaries of physical and emotional fatigue, we are prone to emotional breakdowns. Sleep deprivation is directly related to disease, poor work performance, work related injury, and deterioration of the quality and meaning of human relationship.<sup>9</sup>

Just how serious is sleep deprivation? What happens when we don’t get the sleep we need? Casey Means, MD, states, “At sixteen hours of no sleep, the body begins experiencing mental and physiological deterioration. At nineteen hours of no sleep, a person is as cognitively impaired<sup>10</sup> as someone with a blood alcohol content (BAC) measure of .08 percent which represents being legally intoxicated.”<sup>11</sup>

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<sup>3</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 4.

<sup>4</sup> *Ibid.*, 5-7.

<sup>5</sup> Kolb, Bryan and Ian Q. Whishaw. *Fundamentals of Human Neuropsychology* (New York: Worthy Publishers, 2015), 753.

<sup>6</sup> Feldman Barrett assert the concept of misbudgeting as the idea of mismanaging the energy demands of your body and your emotions. As such as deficit in your body, i.e., physical fatigue, results in a misbudgeting of energy to mange emotions and regulate them when distress.

<sup>7</sup> Feldman Barrett, Lisa. *How Emotions Are Made: The Secret Life of the Brain* (Boston: Houghton Mifflin Harcourt, 2017), 177.

<sup>8</sup> Cozolino, Louis. *The Neuroscience of Human Relationships: Attachment and the Developing Social Brain* (New York: Norton, 2014), 89-90.

<sup>9</sup> Lingiardi, Vittorio and Nancy McWilliams. *Psychodynamic Diagnostic Manual, Second Edition* (New York: Guildford, 2017), 852.

<sup>10</sup> Means, MD, Casey with Calley Means. *Good Energy: The Surprising Connection Between Metabolism and Limitless Health* (New York: Avery Books, 2024), 195.

<sup>11</sup> <https://medlineplus.gov/lab-tests/blood-alcohol-level/>

Based on a 2010 study,<sup>12</sup> Johnson and Hand report, “Having a properly functioning circadian rhythm is critical to healthy hormone balance, metabolism function, memory and mental performance, optimal cellular energy production, and the immune system. In fact, one study showed people with chronic insomnia have a *three times greater risk of dying from any cause*.”<sup>13</sup>

A study done by Harvard’s Division of Sleep Medicine, demonstrated that “drowsy driving is responsible for 20 percent of all motor vehicle crashes. That means that drowsy driving causes 1 million crashes, 500,000 injuries, and 8,000 deaths each year in the U.S.”<sup>14</sup> Police who are on duty while sleep deprived are at higher risk for experiencing major health problems, e.g., cardiovascular disease and metabolic syndrome,<sup>15</sup> and reduced their ability to act and perform in the best interest of public safety,<sup>16</sup> including impaired judgment while driving (hand to eye coordination) as well as falling asleep while driving.<sup>17</sup>

According to the Oxford Occupational Medicine report on the relationship between sleep deprivation and mental health among police officers, “Short sleep duration (<5 hours) was significantly related to high stress, low vitality, high fatigue, high depressive feeling, and high somatic responses in men and women. In men, short sleep duration was related to high irritability.”<sup>18</sup>

In the most extreme instance of sleep deprivation, Fatal Familial Insomnia (FFI) is a “very rare and invariably fatal autosomal dominant neurodegenerative prion disease caused by a mutation of the prion protein (PRNP) gene.”<sup>19</sup> Onset of FFI is usually in middle age.<sup>20</sup> “Hallmarks of the disease include aggressively progressive insomnia;<sup>21</sup> subsequent autonomic disturbances, including tachycardia, hyperhidrosis, and hypertension; cognitive disturbances, including deficits in short-term memory and attention; balance problems; and endocrine dysfunction. The disease is currently incurable and has an average duration of 18 months, ultimately leading to

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<sup>12</sup> Wehrens SM, Hampton SM, Finn RE, Skene DJ. Effect of total sleep deprivation on postprandial metabolic and insulin responses in shift workers and non-shift workers. *J Endocrinol*. 2010 Aug;206(2):205-15. doi: 10.1677/JOE-10-0077. Epub 2010 May 17. PMID: 20479040.

<sup>13</sup> Johnson, Robyn and Lauren Hand. *Integrative and Functional Medical Nutrition Therapy: Principles and Practices* (Switzerland: Humana Press, 2020), 130. Emphasis mine.

<sup>14</sup> <https://sleep.hms.harvard.edu/education-training/public-education/sleep-and-health-education-program/sleep-health-education-89>

<sup>15</sup> [https://journalhss.com/wp-content/uploads/JHSS\\_STRS1.pdf](https://journalhss.com/wp-content/uploads/JHSS_STRS1.pdf)

<sup>16</sup> Garbarino S, Guglielmi O, Puntoni M, Bragazzi NL, Magnavita N. *Sleep Quality among Police Officers: Implications and Insights from a Systematic Review and Meta-Analysis of the Literature*. *Int J Environ Res Public Health*. 2019 Mar 11;16(5):885. doi: 10.3390/ijerph16050885. PMID: 30862044; PMCID: PMC6427768.

<sup>17</sup> <https://nij.ojp.gov/topics/articles/impact-sleep-deprivation-police-performance#note2>

<sup>18</sup> Sayaka Sakuma, Kazuhiro Nogawa, Yuuka Watanabe, Yasushi Suwazono. *P-118 ASSOCIATION BETWEEN SLEEP DEPRIVATION AND MENTAL HEALTH AMONG POLICE OFFICERS*. *Occupational Medicine*, Volume 74, Issue Supplement\_1, July 2024, Page 0, <https://doi.org/10.1093/occmed/kqae023.0625>, i240.

<sup>19</sup> Khan Z, Sankari A, Bollu PC. *Fatal Familial Insomnia*. [Updated 2024 Feb 25]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2025 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK482208/>

<sup>20</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 68.

<sup>21</sup> McNamara indicates, “After disease onset there is a progressive insomnia and somnolence (dreamy sleepiness), cf., McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 68.

death.”<sup>22</sup> Postmortem analyses, according to McNamara, reveals “degeneration and loss of cells in the thalamus and in mesio-orbital areas of the frontal lobes... and demonstrates the underlying functional connections between NREM sleep and the frontal lobes in humans.”<sup>23</sup>

## THE CIRCADIAN RHYTHM

The curious phrase “circadian rhythm” is both fascinating and an essential aspect of understanding why getting a good night’s sleep is so important. What does the word circadian mean? The word circadian was first coined in 1959 by German-born biologist Franz Halberg. The compound word is based on two Latin words, *circa* meaning *about* and the word *diem* meaning *day*.<sup>24</sup>

According to National Institute of General Medical Sciences, the scientific and medical phrase *circadian rhythm* refers to patterns, cycles, or rhythms that express as physical, mental, and behavioral changes in an organism during a 24-hour cycle or solar day. Light and dark have the biggest influence on circadian rhythms.<sup>25</sup>

## WHAT HAPPENS WHEN WE SLEEP?

Sleep can be generally divided into the non-rapid eye movement (NREM) sleep phase<sup>26</sup> and the rapid eye movement (REM) sleep phase. In adults, the first NREM-REM cycle is about 70-120 minutes<sup>27</sup> and later cycles may last about 90-120 minutes.<sup>28</sup> Humans require 4 to 6 full sleep cycles per day.<sup>29</sup> Non-rapid eye movement (NREM) sleep is associated with the conservation of energy and restoration, rapid cell division in some tissues, and protein synthesis.<sup>30</sup> REM sleep is associated with learning, unlearning irrelevant information, memory consolidation, emotional processing, and mood/emotion regulation.<sup>31</sup> REM sleep plays an important role in how memories are processed and even change over time. During REM sleep the brain processes both relevant

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<sup>22</sup> Khan Z, Sankari A, Bollu PC. *Fatal Familial Insomnia*. [Updated 2024 Feb 25]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2025 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK482208/>

<sup>23</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 68.

<sup>24</sup> <https://www.etymonline.com/word/circadian>

<sup>25</sup> <https://www.nigms.nih.gov/education/fact-sheets/Pages/circadian-rhythms.aspx>

<sup>26</sup> During NREM sleep, also known as Slow Wave Sleep, conscious is deeply depressed... this is the deep slumber during which an alarm clock would wake us up with a startle reflex. However, during REM sleep cf., Damasio, Antonio. *Self Comes to Mind: Constructing the Conscious Brain* (New York: Vintage Books, 2010), 240. During REM sleep, there is an acceleration in Beta wave activity.

<sup>27</sup> Kaplan, Katherine A. and Allison G. Harvey. *Clinical Handbook of Psychological Disorders: A Step-by-Step Treatment Manual* (New York: Guilford Press, 2014), 640.

<sup>28</sup> Source: <https://www.sleepfoundation.org/stages-of-sleep>

<sup>29</sup> Patel AK, Reddy V, Shumway KR, et al. *Physiology, Sleep Stages*. [Updated 2022 Sep 7]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK526132/>. Note: The human body cycles through two phases of sleep, (1) rapid eye movement (REM) and (2) non-rapid eye movement (NREM) sleep, which is further divided into three stages, N1-N3. Each phase and stage of sleep includes variations in muscle tone, brain wave patterns, and eye movements. The body cycles through all of these stages approximately 4 to 6 times each night, averaging 90-120 minutes for each cycle.

<sup>30</sup> Kaplan, Katherine A. and Allison G. Harvey. *Clinical Handbook of Psychological Disorders: A Step-by-Step Treatment Manual* (New York: Guilford Press, 2014), 641.

<sup>31</sup> Kaplan, Katherine A. and Allison G. Harvey. *Clinical Handbook of Psychological Disorders: A Step-by-Step Treatment Manual* (New York: Guilford Press, 2014), 641.

and irrelevant information and engages in the integration of emotions with this information.<sup>32</sup> These processes are not unrelated to healing from traumatic life experiences. In this sense, dreams can be a kind of “internal counselor” in the brain. All the more reason to sleep well and sleep for at least 7-9 hours per day.

It is important to note the importance of sleep for children. NREM sleep is associated with a major increase in the release of Human Growth Hormone (HGH).<sup>33</sup> Children, ages one to five, need 10 to 14 hours of sleep, and children ages six to twelve, need 10 to 12 hours of sleep per day.<sup>34</sup> It is also important to note that the neurotransmitter adenosine accumulates during the day and signals the feeling of being sleepy.<sup>35</sup> When combined with darkness (the absence of light), the brain is ready to engage in sleep.

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<sup>32</sup> Van der Kolk, M.D., Bessel. *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma* (New York: Penguin Books, 2014), 262.

<sup>33</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 65.

<sup>34</sup> Source: <https://my.clevelandclinic.org/health/articles/12148-sleep-basics>

<sup>35</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 33.

## STAGES OF SLEEP<sup>36</sup>

By way of summary, the five sleep stages may be described as: “wake, N1, N2, N3, and REM. Stages N1 to N3 are considered non-rapid eye movement (NREM) sleep, with each stage a progressively deeper sleep. Approximately 75% of sleep is spent in the NREM stages, with the majority spent in the N2 stage.”<sup>37</sup> We typically experience a good night’s sleep when we get four to five sleep cycles, with the progression of sleep stages in the following order: N1, N2, N3, N2, REM.<sup>38</sup> A complete sleep cycle takes roughly 90 to 110 minutes. The first REM period is short, and, as the night progresses, longer periods of REM and decreased time in deep sleep (NREM) occur.”<sup>39</sup>

According to McNamara, “Sleep loss has been linked with several leading causes of death in the United States, including cardiovascular disease, cancer, stroke, diabetes, and hypertension.”<sup>40</sup> McNamara’s list represent serious illness and disease. What about the common cold (rhinovirus) and sleep? “Compared with 7 hours of sleep nightly, fewer than 5 hours of sleep is associated

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<sup>36</sup> I have borrowed extensively from Purves and Fitzpatrick. They write: “Humans descend into sleep in stages that succeed each other over the first hour or so after retiring (Figure 28.5). These characteristic stages are defined primarily by electroencephalographic criteria. Initially, during “drowsiness,” the frequency spectrum of the electroencephalogram (EEG) is shifted toward lower values and the amplitude of the cortical waves slightly increases. This drowsy period, called stage I sleep, eventually gives way to light or stage II sleep, which is characterized by a further decrease in the frequency of the EEG waves and an increase in their amplitude, together with intermittent high-frequency spike clusters called sleep spindles. Sleep spindles are periodic bursts of activity at about 10–12 Hz that generally last 1 or 2 seconds and arise as a result of interactions between thalamic and cortical neurons. In stage III sleep, which represents moderate to deep sleep, the number of spindles decreases, whereas the amplitude of low-frequency waves increases still more. In the deepest level of sleep, stage IV sleep, the predominant EEG activity consists of low frequency (1–4 Hz), and high-amplitude fluctuations called delta waves, the characteristic slow waves for which this phase of sleep is named. The entire sequence from drowsiness to deep stage IV sleep usually takes about an hour.”

“These four sleep stages are called non-rapid eye movement (non-REM) sleep, and its most prominent feature is the slow-wave (stage IV) sleep. It is most difficult to awaken people from slow-wave sleep; hence it is considered to be the deepest stage of sleep. Following a period of slow-wave sleep, however, EEG recordings show that the stages of sleep reverse to reach a quite different state called rapid eye movement, or REM, sleep. In REM sleep, the EEG recordings are remarkably similar to that of the awake state (see Figure 28.5). After about 10 minutes of REM sleep, the brain typically cycles back through the non-REM sleep stages. Slow-wave sleep usually occurs again in the second period of this continual cycling, but not during the rest of the night (see Figure 28.6). On average, four additional periods of REM sleep occur, each having a longer duration. In summary, the typical 8 hours of sleep experienced each night comprise several cycles that alternate between non-REM and REM sleep, the brain being quite active during much of this supposedly dormant, restful time. For reasons that are not clear, the amount of REM sleep each day decreases from about 8 hours at birth to 2 hours at 20 years to only about 45 minutes at 70 years of age.” Source: Purves D, Augustine GJ, Fitzpatrick D, et al., editors. *Neuroscience*. 2nd edition. Sunderland (MA): Sinauer Associates; 2001. Stages of Sleep. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK10996/>

<sup>37</sup> Patel A. K., Reddy V, Shumway KR, et al. *Physiology, Sleep Stages*. [Updated 2022 Sep 7]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK526132/>

<sup>38</sup> Patel A. K., Reddy V, Shumway KR, et al. *Physiology, Sleep Stages*. [Updated 2022 Sep 7]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK526132/>

<sup>39</sup> Patel A. K., Reddy V, Shumway KR, et al. *Physiology, Sleep Stages*. [Updated 2022 Sep 7]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK526132/>

<sup>40</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 4.

with an increased risk of developing the common cold (rhinovirus infection; odds ratio [OR] = 4.50, 95% confidence interval [CI], 1.08-18.69.”<sup>41</sup> The brain’s circadian clock which regulates circadian rhythm is located at the suprachiasmatic nucleus (SCN) above the optic chiasm and the anterior part of the hypothalamus.<sup>42</sup> The nucleus is bilateral and therefore, integrates with both hemispheres of the brain. According to Andrewes, “some neuronal projections that make up the optic nerve branch off to the SCN to give this structure information concerning environmental light.”<sup>43</sup> The sensation known as sleepiness is principally stimulated by SCN-related interaction with the pineal gland<sup>44</sup>. One of the most important functions of the pineal gland is the integration information encoded by light into coordinated secretions of melatonin that promote sleep-wake rhythmicity.<sup>45</sup> In addition, the SCN not only functions as a regulatory system of melatonin, it also regulates variations in body temperature during sleep and levels of alertness during the day.<sup>46</sup> Dysregulation of the circadian rhythm is “implicated in most psychiatric and metabolic pathologies.”<sup>47</sup>

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<sup>41</sup> Alschuler, ND, Lise and Puneet Shroff, MD. “Integrative medicine and Immune Support” in *Integrative Medicine* (New Delhi: Elsevier, 2023), 296. Furthermore, “Logistic regression analysis revealed that actigraphy- assessed shorter sleep duration was associated with an increased likelihood of development of a clinical cold. Specifically, those “sleeping < 5 h (odds ratio [OR] = 4.50, 95% confidence interval [CI], 1.08-18.69) or sleeping between 5 to 6 h (OR = 4.24, 95% CI, 1.08-16.71) were at greater risk of developing the cold compared to those sleeping > 7 h per night; those sleeping 6.01 to 7 h were at no greater risk (OR = 1.66; 95% CI 0.40-6.95).” See Prather AA, Janicki-Deverts D, Hall MH, Cohen S. Behaviorally Assessed Sleep and Susceptibility to the Common Cold. *Sleep*. 2015 Sep 1;38(9):1353-9. doi: 10.5665/sleep.4968. PMID: 26118561; PMCID: PMC4531403. As an interesting corollary study demonstrated that exercise reduces the risk of contracting the common cold in postmenopausal women, cf., “Over 12 months, the risk of colds decreased in exercisers relative to stretchers (P = .02): In the final 3 months of the study, the risk of colds in stretchers was more than threefold that of exercisers (P = .03). Risk of upper respiratory tract infections overall did not differ (P = .16), yet may have been biased by differential proportions of influenza vaccinations in the intervention and control groups. This study suggests that 1 year of moderate-intensity exercise training can reduce the incidence of colds among postmenopausal women. These findings are of public health relevance and add a new facet to the growing literature on the health benefits of moderate exercise.” See Chubak J, McTiernan A, Sorensen B, Wener MH, Yasui Y, Velasquez M, Wood B, Rajan KB, Wetmore CM, Potter JD, Ulrich CM. Moderate-intensity exercise reduces the incidence of colds among postmenopausal women. *Am J Med*. 2006 Nov;119(11):937-42. doi: 10.1016/j.amjmed.2006.06.033. PMID: 17071161.

<sup>42</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 29.

<sup>43</sup> Andrewes, David. *Neuropsychology: From Theory to Practice* (Hove: Psychology Press, 2001), 148.

<sup>44</sup> The pineal gland (epiphysis) is located in the brain attached to the roof of the third ventricle (epithalamus). It secretes the hormone melatonin, which contributes to the process of skin pigmentation, and secretes serotonin and adrenoglomerulotropin, cf., <https://training.seer.cancer.gov/anatomy/endocrine/glands/pituitary.html>

<sup>45</sup> Melmed, Shlomo, Kenneth S. Polonsky, P. Reed Larsen, and Henry M. Kronenberg. *Williams Textbook of Endocrinology* (Philadelphia: Elsevier, 2016), p. 119. Cf., Reiter, Tan, and Galano, 2014, who demonstrated in addition to the SCN, “neuroanatomic studies have established that light-encoded information is relayed to the pineal by a polysynaptic pathway (2014; 29:325-333). This series of synapses ultimately results in innervation of the gland by noradrenergic sympathetic nerve terminals that are critical regulators of melatonin production and release” (Williams, 119). Consider the following article to learn more about the pineal gland and melatonin: Arendt J, Aulinas A. *Physiology of the Pineal Gland and Melatonin*. [Updated 2022 Oct 30]. In: Feingold KR, Anawalt B, Blackman MR, et al., editors. *Endotext* [Internet]. South Dartmouth (MA): MDTText.com, Inc.; 2000-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK550972/>

<sup>46</sup> Kaplan, Katherine A. and Allison G. Harvey. *Clinical Handbook of Psychological Disorders: A Step-by-Step Treatment Manual* (New York: Guilford Press, 2014), 641.

<sup>47</sup> Dinan, Ted. *Nutritional Psychiatry: A Primer for Clinicians* (Cambridge: Cambridge University Press, 2023), 177.

## SLEEP DISORDERS

Sleep disorders are common and affect about one third of adults.<sup>48</sup> Insomnia is described as difficulty initiating sleep or staying asleep or in some cases, both. About 95 percent of people report experiencing some form of insomnia.<sup>49</sup> Based on the evidence provided by polysomnography (sleep study), insomnia expresses as “long term sleep latency, frequent nocturnal awakenings, or prolonged periods of wakefulness during the sleep period or even frequent transient arousals are taken as evidence of insomnia.”<sup>50</sup> Often, difficulty sleeping is not caused by specific medical conditions such as a menstrual cycle, pregnancy, menopause, or sleep apnea. Rather, it is an upsetting relationship or a specific problem that induces an anxiety response. Sleep deprivation may directly associated with traumatic histories of abuse in all forms, abandonment, and even physically and psychological bullying.<sup>51</sup> In case of abuse, seeing a skilled and trusted therapist is critically important for healing and the restoration of quality sleep hygiene.

Furthermore, personal regret, talion dread, and all forms of guilt real or pathogenic, can haunt our minds and incite a stress response that keeps us awake. This is especially true of pathologized guilt and shame<sup>52</sup> directly linked to trauma and abuse.

When sleep disorders are treated successfully, the healing and peace the comes through restorative sleep is life-changing. Again, how do you deal with the primary disruptors of sleep? Regardless of your capacity for faith and even the nebulous term *spirituality*, we would do well to take note of McManners advice for those who experience insomnia for any reason... we must “deal with the stressors in your life and the way you react to them.”<sup>53</sup> For many of us, dealing with our sleep issues requires not only a personally reckoning of our moral and relational sense of self, but also, a visit to your primary care doctor.

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<sup>48</sup> Garbarino S, Guglielmi O, Puntoni M, Bragazzi NL, Magnavita N. *Sleep Quality among Police Officers: Implications and Insights from a Systematic Review and Meta-Analysis of the Literature*. Int J Environ Res Public Health. 2019 Mar 11;16(5):885. doi: 10.3390/ijerph16050885. PMID: 30862044; PMCID: PMC6427768. Those who are being treated with opioids for a variety of medical conditions requiring pain management, may experience significant changes and deficits in hygienic sleep. Specifically, “There is a complex relationship among opioids, sleep and daytime function. Patients and medical providers should be aware that chronic opioid therapy can alter sleep architecture and sleep quality as well as contribute to daytime sleepiness,” cf., Rosen IM, Aurora RN, Kirsch DB, Carden KA, Malhotra RK, Ramar K, Abbasi-Feinberg F, Kristo DA, Martin JL, Olson EJ, Rosen CL, Rowley JA, Shelgikar AV; American Academy of Sleep Medicine Board of Directors. Chronic opioid therapy and sleep: an American Academy of Sleep Medicine position statement. J Clin Sleep Med. 2019;15(11):1671–1673.

<sup>49</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 79.

<sup>50</sup> Roth T. *Insomnia: definition, prevalence, etiology, and consequences*. J Clin Sleep Med. 2007 Aug 15;3(5 Suppl):S7-10. PMID: 17824495; PMCID: PMC1978319.

<sup>51</sup> Cozolino, Louis. *The Neuroscience of Human Relationships: Attachment and the Developing Social Brain* (New York: Norton, 2014), 252.

<sup>52</sup> For those who are willing to consider faith and matters conscience regarding sleep, cf., “8 If we say that we have no sin, we are deceiving ourselves and the truth is not in us. 9 If we confess our sins, He is faithful and righteous, so that He will forgive us our sins and cleanse us from all unrighteousness. 10 If we say that we have not sinned, we make Him a liar and His word is not in us” (1 John 1:8-10). It is through the sacrifice of Jesus that those who believe may know healing and peace.

<sup>53</sup> McManners, MBBS, MBCAM, LF Hom, ND MRN, Deborah. *The Ultimate Holistic Health Book: Your Guide to Ultimate Health and Well-Being* (London: Piatkus, 2004), 276.

The most common circadian rhythm disorders are Delayed Sleep Phase Syndrome (DSPS) and Advanced Sleep Phase Syndrome (ASPS). DSPS, with an onset usually in adolescence or early adulthood, presents as difficulty getting to sleep at a normal bedtime and staying asleep late in the morning.<sup>54</sup> ASPS is more common in older adults and is associated with early bedtime and early waking.<sup>55</sup>

According to the Cleveland Clinic, another reason some experience disordered sleep is because of calcification of the pineal gland. “Calcification of the pineal gland is *quite common*. In fact, it’s so common that healthcare providers often use a calcified pineal gland as a landmark on x-rays to help identify different structures of the brain. Calcification happens when calcium builds up in body tissue, causing the tissue to harden.”<sup>56</sup> “Your pineal gland tends to calcify as you age. While some calcification is normal, excessive calcification can prevent your pineal gland from functioning properly. Some studies have revealed that the degree of calcification of the pineal gland is higher in those affected by Alzheimer’s disease. There’s a loose link between pineal gland calcification and some migraine and cluster headaches”<sup>57</sup>

### **DISORDERED SLEEP AND MENTAL HEALTH**

Gabbard notes that both insomnia and hypersomnia are symptomatic of Major Depressive Disorder and Generalized Anxiety Disorder.<sup>58</sup> These kinds of sleep patterns not only help define the common diagnostic categories of depression and anxiety, they will *exacerbate* it. Childhood trauma (primary or secondary), is a potent intrapsychic force that drives the avoidance of sleep or the avoidance of being awake. For some, sleep is the ultimate non-suicidal means to disconnect (cf., dissociation) from the realities of the world. In the words of Dr. Chefetz, sleep can hold traumatic experiences and memories at bay.<sup>59</sup> Regarding my clients who are adult women sexually abused as little girls, their sexual trauma occurred in a *bedroom*, on a *bed*, in *darkness*, when it was *time to sleep!* For them the bedroom, a bed, and the evening, and sleep are triggering and cause ongoing abreactivity that disturbs sleep patterns resulting in poor sleep hygiene.

For those who have experienced childhood trauma, cf., Complex-Posttraumatic Stress Disorder, their childhood trauma may express in disturbing dreams and night terrors. This often causes the person to become hyperaroused and hypervigilant as a means of self-protection.<sup>60</sup> For example, a hyperaroused auditory sense (acuity) and the focused *listening* for footsteps in the hall or the sound of the handle on the bedroom door, fearing what will happen next. In these cases and many others like them, psychotherapeutic care from a skilled and trusted therapist is essential.

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<sup>54</sup> Arciniegas, David B., C. Alan Anderson, and Christopher M. Filley. *Behavioral Neurology & Neuropsychiatry* (Cambridge: Cambridge University Press, 2018), 104.

<sup>55</sup> *Ibid.*, 104-05.

<sup>56</sup> <https://my.clevelandclinic.org/health/body/23334-pineal-gland>. *Emphasis mine*.

<sup>57</sup> <https://my.clevelandclinic.org/health/body/23334-pineal-gland>

<sup>58</sup> Gabbard, MD, Glen O. *Gabbard’s Treatment of Psychiatric Disorders – DSM 5 Edition* (Washington, DC: American Psychiatric Association, 2014), 214, 382.

<sup>59</sup> Chefetz, MD, Richard A. *Intensive Psychotherapy for Persistent Dissociative Processes: The Fear of Feeling Real* (New York: Norton, 2015), 301.

<sup>60</sup> Lingardi, Vittorio and Nancy McWilliams. *Psychodynamic Diagnostic Manual, Second Edition* (New York: Guilford, 2017), 185.

## DREAMS

Dreams are a fascinating phenomenon of the human brain. Dreams may be composed of brief and vague images to very vivid and extended movie-like scenes. McNamara notes, “Dreams exhibit greater clarity in the foreground of the dreamer’s attention while background details are vaguely represented.”<sup>61</sup> The full spectrum of emotions may be experienced during dreams. About 20-30 percent of dreams are black and white, i.e., achromatic.<sup>62</sup> However, 80 percent of dreams contain negative emotions for both males and females.<sup>63</sup> Ginot’s erudite comment is salient to this subject, “dreams give expression to emotional self-states, inchoate early memories, and the often distorted associations that accompany them.”<sup>64</sup>

About 50 percent of dreams feature strangers to the person dreaming.<sup>65</sup> Based on the research of Strauch and Meier, the emotional expression and content of dreams are logical and congruent.<sup>66</sup> In other words, if something negative is happening in a dream, the corresponding emotions are logically negative as well. Dreams have a narrative structure. Or, in other words, dreams are telling a story or repeating and processing information in a story-like manner.<sup>67</sup> This gives more insight into the self-counseling aspect of dreams.

Lucid dreaming is the mysterious sleep phenomenon of being asleep and dreaming while being aware that you are dreaming.<sup>68</sup> According to the research of Voss, Holzmann, Tuin, and Hobson, data shows that lucid dreaming “constitutes a hybrid state of consciousness with definable and measurable differences from waking and from REM sleep, particularly in frontal areas.”<sup>69</sup> It is presumed that lucid dreams arise from non-lucid dreams in REM sleep.<sup>70</sup> “Differences between REM sleep and lucid dreaming were most prominent in the 40-Hz frequency band. The increase in 40-Hz power was especially strong at frontolateral and frontal sites. These results suggest that

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<sup>61</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 127.

<sup>62</sup> *Ibid.*, 127.

<sup>63</sup> *Ibid.*, 127.

<sup>64</sup> Ginot, Efrat. *The Neuropsychology of the Unconscious: Integrating Brain and Mind in Psychotherapy* (New York: Norton, 2015), 33.

<sup>65</sup> McNamara, Patrick. *Dreams and Visions: How Religious Ideas Emerge in Sleep and Dreams* (Santa Barbara: Praeger, 2016), 21.

<sup>66</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 127, citing Strauch, Inge and Barbara Meier. *In Sear of Dreams: Results of Experimental Dream Research* (Albany: State University of New York Press, 1996), 94-95.

<sup>67</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 133.

<sup>68</sup> Baird B, Mota-Rolim SA, Dresler M. *The cognitive neuroscience of lucid dreaming*. *Neurosci Biobehav Rev*. 2019 May;100:305-323. doi: 10.1016/j.neubiorev.2019.03.008. Epub 2019 Mar 14. PMID: 30880167; PMCID: PMC6451677.

<sup>69</sup> Voss U, Holzmann R, Tuin I, Hobson JA. *Lucid dreaming: a state of consciousness with features of both waking and non-lucid dreaming*. *Sleep*. 2009 Sep;32(9):1191-200. doi: 10.1093/sleep/32.9.1191. PMID: 19750924; PMCID: PMC2737577.

<sup>70</sup> *Ibid.*, PMID: 19750924; PMCID: PMC2737577, cf., comment based on the research of LaBerge S, Levitan L, Dement WC. *Lucid dreaming: Physiological correlates of consciousness during REM sleep*. *J Mind Behav*. 1986;7:251-58.

40-Hz activity holds a functional role in the modulation of conscious awareness across different conscious states.”<sup>71</sup>

If you are interested in remembering your dreams, Naiman recommends, journaling your dreams first thing when you have awakened.<sup>72</sup>

### **SLEEP AND HORMONES**

Regarding dreams and hormones, the average person experiences about several spikes in sexual arousal during every REM phase of a full night’s sleep.<sup>73</sup> These spikes are expressed as penile and clitoral tumescence.<sup>74</sup> Brubaker’s research revealed that adult males commonly have sexual dreams involving multiple anonymous partners while females report sexual dreams with a familiar partner.<sup>75</sup> McNamara states this phenomenon may or may not be associated with erotic desire or sexual wish fulfillment.<sup>76</sup> It is concluded that sexual signaling or spikes in sex related hormones may be associated with hormonal resets in preparation for fitness, survival, procreation, and successful living for the next day.

### **THINGS THAT GO BUMP IN THE NIGHT: BAD DREAMS & NIGHT TERRORS**

Dreams during REM sleep may be terrifying, cf., night terrors.<sup>77</sup> During REM sleep, the amygdala is active as well as other emotion-generating systems in the limbic regions of the brain. The dorsolateral prefrontal cortex (DLPC)<sup>78</sup> deactivates and allows the brain to feel and envision strange, illogical, and even psychotic images and scenes. The illogical and even psychotic aspects to some dreams may be related to dopaminergic systems remaining active during REM.<sup>79</sup> Dopamine, when secreted in excessive amounts is considered one of the causes for schizophrenia and other psychotic disorders. Since the DLPC is deactivated, the brain lacks a logical “break pedal” to confront the “crazy” or illogic of dreams and bring the content into a congruence with the commonsense world of being awake.

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<sup>71</sup> *Ibid.*, PMID: 19750924; PMCID: PMC2737577.

<sup>72</sup> Naiman, PhD, Rubin. “Insomnia” in *Integrative Medicine* (New Delhi: Elsevier, 2023), 85.

<sup>73</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 74.

<sup>74</sup> *Ibid.*, 74-74.

<sup>75</sup> *Ibid.*, 75.

<sup>76</sup> *Ibid.*, 74, 181-82.

<sup>77</sup> “It is estimated that sleep terrors occur in 1 to 6.5% of children 1 to 12 years of age. Sleep terrors typically occur in children between 4 and 12 years of age, with a peak between 5 and 7 years of age.” Leung AKC, Leung AAM, Wong AHC, Hon KL. Sleep Terrors: An Updated Review. *Curr Pediatr Rev.* 2020;16(3):176-182. doi: 10.2174/1573396315666191014152136. PMID: 31612833; PMCID: PMC8193803.

<sup>78</sup> According to Louis Cozolino, *The Neuroscience of Human Relationships: Attachment and the Developing Social Brain* (New York: W. W. Norton, 2014), 37, 326, 347, The DLPFC provides executive function for working memory, explicit memory, memories of abandonment, and decision making with the necessary attention processing to make those decisions. Note: Working memory is “...the small amount of information that can be held in mind and used in the execution of cognitive tasks, in contrast with long-term memory, the vast amount of information saved in one’s life” (Cowan N. Working Memory Underpins Cognitive Development, Learning, and Education. *Educ Psychol Rev.* 2014 Jun 1;26(2):197-223. doi: 10.1007/s10648-013-9246-y. PMID: 25346585; PMCID: PMC4207727).

<sup>79</sup> Arciniegas, David B., C. Alan Anderson, and Christopher M. Filley. *Behavioral Neurology & Neuropsychiatry* (Cambridge: Cambridge University Press, 2018), 100.

Regarding sleep paralysis and REM sleep, McNamara indicates one of the most “paradoxical features of REM is that phasic eye movements and muscle twitches occur upon a background of paralysis in the antigravity musculature including the jaw, neck, and limbs.”<sup>80</sup> REM sleep paralysis is initiated when glutamatergic SubC cells activate neurons in the ventral medial medulla, which causes release of gamma-aminobutyric acid (GABA) and glycine onto skeletal motoneurons.<sup>81</sup> Sleep scientists argue these antigravity muscles become paralyzed in order to protect the sleeper from literally acting out their dreams, since dream enactment behaviors may result in injury to self or others.<sup>82</sup> It is very common for people to experience an evil and malevolent presence in the room or in a scene in their dreams during REM sleep while experiencing sleep paralysis. This causes the sleeper to feel like they can’t run away from the dangerous animal, person, or malevolent presence. This is normal and not a sign of Satanic presence or demonic attack.<sup>83</sup>

## HOW TO GET A GOOD NIGHT’S SLEEP!

### 1. Eat well.

Julie Rucklidge and colleagues indicate that consuming necessary amounts of broad-spectrum micronutrients (BSMs) in our diet have a positive effect on sleep.<sup>84</sup> A whole food diet is essential for all aspects of biological and mental health. For example eating nutritionally dense foods rich in BSMs, e.g., Vitamin A, C, D, E, and B complex (B1, B2, B3, B5, B6, B7, B9, B12), minerals such as calcium, magnesium, iron, zinc, copper, and selenium, and trace elements like manganese, chromium, and molybdenum, support overall health and mental well-being. In fact, BSMs were proven to reduce stress levels and even reduce the probability of experiencing PTSD symptoms during acute stress from 65% down to 19% over a four week period.<sup>85</sup>

Minerals and vitamins are fundamental to maintaining a healthy brain as they support the brain's metabolic functioning, can act as anti-inflammatory agents, are involved in neurodevelopment, modulate genetic expression and cell signaling, and are involved in the production of neurotransmitters and in maintaining biochemical normalcy.<sup>86</sup>

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<sup>80</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 73.

<sup>81</sup> Fraigne JJ, Torontali ZA, Snow MB, Peever JH. REM Sleep at its Core - Circuits, Neurotransmitters, and Pathophysiology. *Front Neurol*. 2015 May 29;6:123. doi: 10.3389/fneur.2015.00123. PMID: 26074874; PMCID: PMC4448509.

<sup>82</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 73-74, 86, 91-98.

<sup>83</sup> See Psalm 91:10; Proverbs 12:21; Matthew 6:13; 1 John 2:13; 3:8; 5:18

<sup>84</sup> Rucklidge, Julia J, Jeanette M. Johnstone, Amelia Villagomez, Noshene Ranjbar, and Bonnie J. Kaplan. “Broad-Spectrum Micronutrients and Mental Health” in Dinan, Ted. *Nutritional Psychiatry: A Primer for Clinicians* (Cambridge: Cambridge University Press, 2023), 162.

<sup>85</sup> *Ibid.*, 158.

<sup>86</sup> Villagomez A, Cross M, Ranjbar N. Broad spectrum micronutrients: a potential key player to address emotional dysregulation. *Front Child Adolesc Psychiatry*. 2023 Dec 15;2:1295635. doi: 10.3389/frcha.2023.1295635. PMID: 39839581; PMCID: PMC11747906. See also: Blampied M, Bell C, Gilbert C, Rucklidge JJ. Broad spectrum micronutrient formulas for the treatment of symptoms of depression, stress, and/or anxiety: a systematic review. *Expert Rev Neurother*. 2020 Apr;20(4):351-371. doi: 10.1080/14737175.2020.1740595. PMID: 32178540.

When we eat a whole food diet rich in both *macro* and *micro* nutrients, our physical health correlates with our mental health which correlates with our quantity and quality of sleep.

## 2. **Find peace.** *Really.*

If possible and within reason, resolve relationship conflicts and personally distressing problems in order to establish a hygienic sleep pattern.<sup>87</sup> After a frustrating fight with your spouse, going to sleep with peace of mind is almost impossible! Why?

First, the activation of the parasympathetic nervous system (cf., rest and digest) is required for a good night's sleep. Stress relates to anything that moves us into threat response.<sup>88</sup> If our "fight and flight" reflex is activated due to fear, worry, anger, resentment, bitterness, etc., it is difficult to sense safety, peace, or contentment, for example, and therefore *relax* and go to sleep. The brain's threat activation systems help the individual respond to an emergency and therefore produce intense boosts in energy to cope with the threat.<sup>89</sup>

If our threat is in our mind, i.e., mental perceptions of danger, dysregulated emotions, etc., it becomes very difficult to calm down and shut off the stress response. Because the parasympathetic nervous system (PSNS) is "more active than the sympathetic nervous system (SNS) during non-REM (non-rapid eye movement),<sup>90</sup> to have anxiety or resentment is to impair good sleep hygiene resulting in poor sleep quality and quantity.

As mentioned above, the five sleep stages may be described as: Wakefulness, N1, N2, N3, and REM. "Stages N1 to N3 are considered non-rapid eye movement (NREM) sleep, with each stage a progressively deeper sleep. Approximately 75% of sleep is spent in the nonREM stages, with the majority spent in the N2 stage."<sup>91</sup> This means that the majority of your four to five sleep cycles is spent in non-REM sleep, which is *dominated by the parasympathetic nervous system*.

To the point, to get a good night's sleep, you must deactivate the sympathetic nervous system and activate the parasympathetic nervous system. Naiman states, "chronic cognitive *hyperarousal* associated with elevated metabolic rate, sympathetic *overactivation*, and chronic inflammation is a common substrate of insomnia."<sup>92</sup> How do we deactivate the SNS? Primarily by resolving personal and relationship problems.<sup>93</sup> For many of us, we settle for

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<sup>87</sup> The admonition of Paul is not lost on this concept! He writes, "26 Be angry, and yet do not sin; do not let the sun go down on your anger, 27 and do not give the devil an opportunity" (Ephesians 4:26-27).

<sup>88</sup> Cabaniss, MD, Deborah L., Sabrina Cherry, Carolyn J. Douglas, and Anna Schwartz. *Psychodynamic Psychotherapy: A Clinic Manual* (West Sussex: Wiley Blackwell, 2017), 319.

<sup>89</sup> Nelson, Randy J. and Lance J. Kriegsfeld. *An Introduction to Behavioral Endocrinology* (New York: Oxford University Press, 2023), 555.

<sup>90</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 67.

<sup>91</sup> Patel A. K., Reddy V, Shumway KR, et al. Physiology, Sleep Stages. [Updated 2022 Sep 7]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan-. Source: <https://www.ncbi.nlm.nih.gov/books/NBK526132/>

<sup>92</sup> Naiman, PhD, Rubin. "Insomnia" in *Integrative Medicine* (New Delhi: Elsevier, 2023), 78. Emphasis mine.

<sup>93</sup> Grounding and redirecting cognitive focus are also involved in the deactivation of the SNS. However, doing so may only effectively treat a symptom and fail to deal with the cause. For most of us, the etiology of our difficulty sleeping is directly related to our relationships and existential selves.

ego defenses such as denial and avoidance<sup>94</sup> to cope with our problems.<sup>95</sup> Or worse still, we engage in self-shame and introjection.<sup>96</sup> In so doing, we perpetuate our distress and often times, bring much disease to both our bodies and souls.

One of the ways we experience resolution in our relationship problems is in the giving and receiving of forgiveness. The consequences of our behaviors and decisions hurt not only others, but also ourselves. Often, it is impossible to repair damage done in our relationship. We are left with the task of **giving and receiving forgiveness** and the subsequent work of rebuilding trust.

Psalm 32:1-2, “How blessed is he whose wrongdoing is forgiven, Whose sin is covered!  
2 How blessed is a person whose guilt the Lord does not take into account,  
And in whose spirit there is no deceit!”

Psalm 130:1-4, “Out of the depths I have cried to You, Lord. 2 Lord, hear my voice!  
Let Your ears be attentive To the sound of my pleadings. 3 If You, Lord, were to  
keep account of guilty deeds, Lord, who could stand? 4 But there is forgiveness with  
You, So that You may be revered.”

Matthew 6:9-15, 9 “Pray, then, in this way: ‘Our Father, who is in heaven, Hallowed be  
Your name. 10 Your kingdom come. Your will be done, On earth as it is in heaven.  
11 Give us this day our daily bread. 12 And forgive us our debts, as we also have  
forgiven our debtors. 13 And do not lead us into temptation, but deliver us from evil.’  
14 For if you forgive other people for their offenses, your heavenly Father will also  
forgive you. 15 But if you do not forgive other people, then your Father will not forgive  
your offenses.”

Finding *peace is essential for good sleep hygiene*. Socrates’ famous dictum *the unexamined life is not worth living*, still resonates as true today.<sup>97</sup> It is also true that a life of unresolved conflict is a thief of peaceful sleep. See additional ways to calm yourself and deactivate the parasympathetic nervous system below. Adler, knowing the importance of sleep, writes the following statement in the first edition of his 1932, *What Life Should mean to You*: “Our

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<sup>94</sup> Neziroglu, Fugen, Beth Forhman, and Sony Khemlani-Patel. “Exposure and Response Prevention Treatment for Obsessive-Compulsive Disorder” in *Clinical Obsessive-Compulsive Disorders in Adults and Children* (Cambridge: Cambridge University Press, 2011), 102.

<sup>95</sup> Cabaniss, MD, Deborah L., Sabrina Cherry, Carolyn J. Douglas, and Anna Schwartz. *Psychodynamic Psychotherapy: A Clinic Manual* (West Sussex: Wiley Blackwell, 2017), 31-37.

<sup>96</sup> Moursund, Janet P. and Richard G. Erskine. *Integrative Psychotherapy: The Art and Science of Relationship* (Toronto: Thomson Brooks/Cole, 2004), 60.

<sup>97</sup> Attributed to Socrates as referenced by Plato, *Apology* (38a5–6), cf., “[38a] and if again I say that to talk every day about virtue and the other things about which you hear me talking and examining myself and others is the greatest good to man, and that the unexamined life is not worth living, you will *believe me still less*. *This is as I say, gentlemen, but it is not easy to convince you.*” *Plato in Twelve Volumes*, Vol. 1 translated by Harold North Fowler; Introduction by W.R.M. Lamb. Cambridge, MA, Harvard University Press; London, William Heinemann Ltd. 1966.

sleep can be undisturbed only if we are free from tension and sure of the solution of our problems!”<sup>98</sup>

Second, consider the spiritual and psychological wisdom behind these Old and New Testament texts:

Psalm 4:8, “In peace I will both lie down and sleep For You alone, Lord, have me dwell in safety.”

Psalm 23:1-3, “1 The Lord is my shepherd, I will not be in need. 2 He lets me lie down in green pastures; He leads me beside quiet waters. 3 He restores my soul; He guides me in the paths of righteousness For the sake of His name.”

John 14:27, “Peace I leave you, My peace I give you; not as the world gives, do I give to you. Do not let your hearts be troubled, nor fearful.”

Romans 12:17-18, “17 Never repay evil for evil to anyone. Respect what is right in the sight of all people. 18 If possible, so far as it depends on you, be at peace with all people.”

Romans 14:19, “So then we pursue the things which make for peace and the building up of one another.”

Colossians 3:12-15, “12 So, as those who have been chosen of God, holy and beloved, put on a heart of compassion, kindness, humility, gentleness, and patience; 13 bearing with one another, and forgiving each other, whoever has a complaint against anyone; just as the Lord forgave you, so must you do also. 14 In addition to all these things put on love, which is the perfect bond of unity. 15 Let the peace of Christ, to which you were indeed called in one body, rule in your hearts; and be thankful.”

3. Define and enforce **healthy boundaries** all your relationships.

The inability to say no to unhealthy things is a direct corollary to a dysregulated and disordered life. Glasser argued, “Patients, no matter what their psychiatric complaint, suffer from a universal defect: they are unable to fulfill their needs in a realistic way and have taken some less realistic way in their unsuccessful attempts to do so.”<sup>99</sup>

Cloud and Townsend state, “Boundaries define us. They define what is me and what is not me. A boundary shows me where I end and someone else begins, leading me to a sense of ownership.”<sup>100</sup> Much of our stress and anxiety are directly related to our relationships and the belief that we have no control of our daily lives (boundaries).

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<sup>98</sup> Adler, Alfred. *What Life Should Mean* (Eastford, CT: Martino Fine Books, 2010), 99.

<sup>99</sup> Glasser, MD, William. *Reality Therapy: A New Approach to Psychiatry* (New York: Harper Row, 1975), 20.

<sup>100</sup> Cloud, Henry and John Townsend. *Boundaries: When to Say Yes and When to Say No to Take Control of Your Life* (Grand Rapids: Zondervan, 1992), 31.

4. Limit and/or protect yourself from disturbing movies, reels, social media, and images that impair hygienic sleep. This is especially important for people who are deeply empathic and tend to *experience* a movie more than just *watching* the movie. In addition, those who suffer from Generalized Anxiety Disorder or Highly Sensitive Person<sup>101</sup> condition may be deeply upset or cognitively hyperaroused, thereby impairing good sleep.
5. It may be time to use **melatonin**. Talk with your healthcare provider about using melatonin as an aid to activate sleep onset.<sup>102</sup> Melatonin is a common sleep aid helping people get sleep. Melatonin is particularly helpful for two segments of society, the aging and the visually impaired. As we age melatonin levels decline gradually over the life-span and may correlated with less sleep efficacy, “very often associated with advancing age, as well as to deterioration of many circadian rhythms.”<sup>103</sup>

In a study for the Visual Impaired and Circadian Rhythm Disorders,<sup>104</sup> it was demonstrated that the “underlying misalignment between circadian and sleep-wake cycles for the visually impaired could be improved using appropriately timed melatonin treatment. In fact, the use of melatonin was found to be fundamental for the optimal treatment of circadian rhythm sleep disorders.”<sup>105</sup>

According to Jenny Yu, MD FACS, based on several studies, the standard dosage of melatonin for an adult, ranges between 1 and 10 mg,<sup>106</sup> with 2 – 6 mg as a standard dosage. Glen Gabbard indicates administering melatonin for Delayed Sleep Phase Type of Circadian Rhythm Sleep-Wake Disorders, with a dosage between 0.3 mg to 5 mg per evening.<sup>107</sup> Taking melatonin in excess of 5 mg is unlikely to help you fall asleep faster. The goal is to find the lowest dose that helps you sleep.<sup>108</sup> Take your melatonin about 30 to 60 minutes prior to bedtime.

6. Establish a regular and **consistent bedtime routine**.<sup>109</sup> Awaken at the same time every morning and go to bed at the same time in the evening. Avoid napping, unless you are a shift worker or have specific health related problems.<sup>110</sup> Napping during the day can make it harder to fall asleep later and may make you more prone to waking up during the night. If you do need to nap: Keep it to 30 minutes or less. Avoid napping later in the afternoon.

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<sup>101</sup> <https://www.healthline.com/health/mental-health/what-its-like-highly-sensitive-person-hsp>

<sup>102</sup> There is a plethora of medications that may interact negatively when combined with melatonin. If you are taking a prescription medication, see your healthcare provider for this information.

<sup>103</sup> Karasek M. Melatonin, human aging, and age-related diseases. *Exp Gerontol.* 2004 Nov-Dec;39(11-12):1723-9. doi: 10.1016/j.exger.2004.04.012. PMID: 15582288.

<sup>104</sup> See Nelson, Randy J. and Lance J. Kriegsfeld. *An Introduction to Behavioral Endocrinology* (New York: Oxford University Press, 2023), 512-14.

<sup>105</sup> Lockley SW, Arendt J, Skene DJ. *Visual impairment and circadian rhythm disorders*. *Dialogues Clin Neurosci.* 2007;9(3):301-14. doi: 10.31887/DCNS.2007.9.3/slockley. PMID: 17969867; PMCID: PMC3202494.

<sup>106</sup> <https://www.healthline.com/health/melatonin-overdose#Can-you-overdose-on-melatonin>

<sup>107</sup> Gabbard, MD, Glen O. *Gabbard's Treatment of Psychiatric Disorders – DSM 5 Edition* (Washington, DC: American Psychiatric Association, 2014), 624-25.

<sup>108</sup> <https://www.healthline.com/nutrition/melatonin-and-sleep#dosage>

<sup>109</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 6.

<sup>110</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 6.

Napping may affect the sleep pattern of older adults more than younger people, but the extent of this is still unclear.<sup>111</sup>

7. Increase exposure to bright **light during the day**. Since the technological advancement of the creation of artificial light, we are now able to “work indoors during the day and remain active well into the night.”<sup>112</sup>
8. Limit your exposure to artificial light in your bedroom. **Sleep in complete darkness** as far as possible. Remember, our exposure to artificial light from electronic devices after sunset, confuses biological clocks.<sup>113</sup> It is important understand that using your cell phone and tablet prior to sleeping stimulates multiple systems in the brain, not least, the lateral habenula. The lateral habenula nuclei<sup>114</sup> have a variety of functions but are mainly involved in the following emotional expression relative to pain, stress and anxiety. It has been suggested that a dysregulation of the lateral habenula can lead to reward confusion, depressive illness and negative emotions, and sleep mechanism control. The lateral habenular nuclei are connected to the pineal gland, which is responsible for regulating the sleep-wake cycle via the secretion of melatonin.<sup>115</sup> Set phone/tablet to “night shift” setting at 6:00 PM.

Using black out curtains or a sleep mask helps block light entering our eyes and disrupting endogenous melatonin production.

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<sup>111</sup> Raj Dasgupta, M.D. Source: <https://www.healthline.com/health/sleep-hygiene#manage-stress>

<sup>112</sup> Nelson, Randy J. and Lance J. Kriegsfeld. *An Introduction to Behavioral Endocrinology* (New York: Oxford University Press, 2023), 517.

<sup>113</sup> <https://www.nigms.nih.gov/education/fact-sheets/Pages/circadian-rhythms.aspx>

<sup>114</sup> Hikosaka O. *The habenula: from stress evasion to value-based decision-making*. *Nat Rev Neurosci*. 2010 Jul;11(7):503-13. doi: 10.1038/nrn2866. PMID: 20559337; PMCID: PMC3447364. Note: Regarding the habenula and sleep, the habenula play a role in sleep. It has mutual connections with the pineal gland, which secretes melatonin--a hormone important for regulating circadian rhythms and promoting sleep. There is also some evidence that the habenula itself produces melatonin. Lesioning the habenula in experimental animals results in a disruption of rapid eye movement (REM) sleep, and thus the habenula may have role in both promoting sleep and sleep quality. Some have suggested the role of the habenula in sleep may also be related to its role in depression, as depressed individuals often suffer from sleep disorders.

<sup>115</sup> Christina Loukopolou MSc. Source: <https://www.kenhub.com/en/library/anatomy/the-habenular-nuclei>

9. Establish a daily **activity routine**. Exercise regularly in the morning and/or afternoon. As little as 10 minutes of aerobic exercise during the daytime can improve sleep.<sup>116</sup>
10. Avoid **drinking water** at least three hours prior to bedtime. Drinking large amounts of water late in the evening will result in a sleep disruption due to the urge to urinate. Begin to hydrate for the day in the morning. Matthew Moher indicates hypo or hyper somnolence as well as sleep interruptions increases the risk of developing Diabetes Mellitus.<sup>117</sup>
11. If you consume alcohol, do so about three hours before bedtime. **Drinking alcohol creates what is called pseudo-sleep**. Under the influence of alcohol, you are sedated and not sleeping. Ethanol disrupts the natural sleep cycle. Again, if you must drink, drink three hours before bedtime. Regarding the damaging effects of alcohol consumption, read critically the 2025 Surgeon General’s Advisory on Alcohol and Cancer Risk.<sup>118</sup>
12. Do not drink **caffeine or energy drinks** in the afternoon and evening.<sup>119</sup> Deborah McManners indicates no caffeine after mid-afternoon.<sup>120</sup> How long does it take our bodies to eliminate the caffeine we ingest in coffee? According to Cherney and Marengo, the *average* half-life (how long it takes for the body to eliminate half of the substance) of caffeine is about five hours.<sup>121, 122</sup> This means, “if you’ve consumed 10 milligrams (mg) of caffeine, after 5 hours, you’ll still have 5 mg of caffeine in your body.”<sup>123</sup>

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<sup>116</sup> McNamara, Patrick. *The Neuroscience of Sleep and Dreams* (Cambridge: Cambridge University Press, 2019), 6. Furthermore, “Aerobic physical activity with sleep hygiene education is an effective treatment approach to improve sleep quality, mood and quality of life in older adults with chronic insomnia,” cf., Reid KJ, Baron KG, Lu B, Naylor E, Wolfe L, Zee PC. Aerobic exercise improves self-reported sleep and quality of life in older adults with insomnia. *Sleep Med.* 2010 Oct;11(9):934-40. doi: 10.1016/j.sleep.2010.04.014. Epub 2010 Sep 1. PMID: 20813580; PMCID: PMC2992829.

<sup>117</sup> Moher, MD, Matthew. “Diabetes Mellitus” in *Integrative Medicine* (New Delhi: Elsevier, 2023), 314.

<sup>118</sup> <https://www.hhs.gov/surgeongeneral/priorities/alcohol-cancer/index.html>

<sup>119</sup> Gabbard, Glen O. *Gabbard’s Treatment of Psychiatric Disorders: DSM 5 Edition* (Washington, DC: American Psychiatric Publishing, 2014), 605-607.

<sup>120</sup> McManners, MBBS, MBCAM, LF Hom, ND MRN, Deborah. *The Ultimate Holistic Health Book: Your Guide to Ultimate Health and Well-Being* (London: Piatkus, 2004), 276.

<sup>121</sup> Cherney, PhD, Kristeen and Katherine Marengo, LDN, R.D. *How Long Does Caffeine Stay in Your System?* <https://www.healthline.com/health/how-long-does-caffeine-last#how-long-symptoms-last>

<sup>122</sup> Cf., Institute of Medicine (US) Committee on Military Nutrition Research. *Caffeine for the Sustainment of Mental Task Performance: Formulations for Military Operations*. Washington (DC): National Academies Press (US); 2001. 2, Pharmacology of Caffeine. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK223808/>. “Caffeine (1,3,7-trimethylxanthine) is a plant alkaloid with a chemical structure of C<sub>8</sub>H<sub>10</sub>N<sub>4</sub>O<sub>2</sub> (see Figure 2–1) and a molecular weight of 194.19. In pure form, it is a bitter white powder. Structurally, caffeine (and the other methylxanthines) resembles the purines. The mean half-life of caffeine in plasma of healthy individuals is about 5 hours. However, caffeine’s elimination half-life may range between 1.5 and 9.5 hours, while the total plasma clearance rate for caffeine is estimated to be 0.078 L/h/kg (Brachtel and Richter, 1992; Busto et al., 1989). This wide range in the plasma mean half-life of caffeine is due to both innate individual variations, and a variety of physiological and environmental characteristics that influence caffeine metabolism (e.g., pregnancy, obesity, use of oral contraceptives, smoking, altitude). The pharmacological effects of caffeine are similar to those of other methylxanthines (including those found in various teas and chocolates). These effects include mild CNS stimulation and wakefulness, ability to sustain intellectual activity, and decreased reaction times.”

<sup>123</sup> Cherney, PhD, Kristeen and Katherine Marengo LDN, R.D. *How Long Does Caffeine Stay in Your System?* <https://www.healthline.com/health/how-long-does-caffeine-last#how-long-symptoms-last>

However, according to Elsa-Grace V. Giardina, MD, MS, FACC, FACP, FAHA, the full range of pharmacokinetics of caffeine is from 2 to 12 hours.<sup>124</sup> In other words, drinking caffeine in the evening may keep you from getting to sleep for hours and hours!

13. If you are **hungry**, eat a light protein snack before bed.<sup>125</sup> Avoid high-sugar or high-acidic foods prior to bedtime. If you suffer from acid reflux, prioritize major diet changes which include small portions of food in the evening several hours before bedtime. An alternative to antacids such as Tums which are loaded with harmful artificial ingredients,<sup>126</sup> etc., is dōTERRA® brand DigestZen DigestTab®. Consider sleeping on your left side to reduce pressure from your stomach on the lower esophageal sphincter.<sup>127</sup> For GERDs patients, see dietary recommendations below.<sup>128</sup> By way of reminder, a whole food diet is essential for all aspects of health. Specifically, “B complex vitamins play a pivotal role in the regulation of sleep mechanisms due to their multifaceted role with the body.”<sup>129</sup>

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<sup>124</sup> Elsa-Grace V. Giardina, MD, MS, FACC, FACP, FAHA. *Cardiovascular effects of caffeine and caffeinated beverages*. <https://www.uptodate.com/contents/cardiovascular-effects-of-caffeine-and-caffeinated-beverages>

<sup>125</sup> Sadock M.D., Benjamin James, Virginia Alcott Sadock, M.D. and Pedro Ruiz, M.D. *Kaplan and Sadock's Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry*. Eleventh Edition (Philadelphia: Wolters Kluwer, 2015), 543.

<sup>126</sup> For example: “Contains artificial flavors and dyes, including FD&C blue #1 lake, FD&C red #40 lake, and FD&C yellow #5 (tartrazine) lake.” Source: <https://www.heb.com/product-detail/tums-extra-strength-750-assorted-tropical-fruit-chewable-tablets/232226>. For the record, after thirty years, the FDA finally band Red Dye 3, a known carcinogen. [https://www.fda.gov/industry/color-additives/fdc-red-no-3#:~:text=The%20FDA%20will%20no%20longer,order%20to%20revoke%20these%20authorizations](https://www.fda.gov/industry/color-additives/fdc-red-no-3#:~:text=The%20FDA%20will%20no%20longer,order%20to%20revoke%20these%20authorizations.). And cf., <https://www.cspinet.org/press-release/red-3-fda-petition>

<sup>127</sup> <https://medlineplus.gov/ency/imagepages/19223.htm>

<sup>128</sup> Foods that may help reduce your symptoms for GERDs. Reflux symptoms may result from stomach acid touching the esophagus and causing irritation and pain. If you have too much acid, you can incorporate these specific foods into your diet to manage symptoms of acid reflux. For example:

a. Vegetables: Vegetables are naturally low in fat and sugar, and they help reduce stomach acid. Good options include green beans, broccoli, asparagus, cauliflower, leafy greens, potatoes, and cucumbers.

b. Ginger: Ginger has natural anti-inflammatory properties, and it's a natural treatment for heartburn and other gastrointestinal problems. You can add grated or sliced ginger root to recipes or smoothies or drink ginger tea to ease symptoms.

c. Oatmeal: Oatmeal is a breakfast favorite, a whole grain, and an excellent source of fiber. Oatmeal can absorb acid in the stomach and reduce symptoms of reflux. Other fiber options include whole-grain breads and whole-grain rice.

d. Non-citrus fruits: non-citrus fruits, including melons, bananas, apples, and pears, are less likely to trigger reflux symptoms than acidic fruits.

e. Lean meats: Lean meats, such as chicken, turkey, fish, and seafood, are low-fat and reduce symptoms of acid reflux. Try them grilled, broiled, baked, or poached.

f. Egg whites: Egg whites are a good option. Stay away from egg yolks, though, which are high in fat and may trigger reflux symptoms.

g. Healthy fats: Sources of healthy fats include avocados, walnuts, flaxseed, olive oil, sesame oil, and sunflower oil. Reduce your intake of saturated fats and trans fats and replace them with these healthier unsaturated fats. Source: <https://www.healthline.com/health/gerd/diet-nutrition#helpful-foods>

<sup>129</sup> Hechtman, PhD, MSciMed (RHHG), BHSc, ND, Leah. *Clinical Naturopathic Medicine* (Australia: Elsevier, 2019), 1302.

14. Set aside **worry time during the day** to solve the problems that are disturbing your ability to get a good night's sleep. See step 1 above. We have that extraordinary ability to think critically about ourselves, our relationships, and the world around us, cf., neuroplasticity. Thus, we can, as Albert Ellis has articulated, think about our thinking, by thinking about thinking about our thinking!<sup>130</sup> In other words, we can think meaningfully and responsibly.

Problem solving is sometimes another way of saying we are *worried* about something, and we are trying to fix it while lying down. This may be an indication of anxiety. If you have a history of anxiety or your family of origin has a history of anxiety, see a healthcare or mental healthcare provider.

To the point, we must grant ourselves permission to think rationally about our problems and cease thinking irrationally about them. If you are preoccupied or worried about something at bedtime, write it down and deal with it in the morning.<sup>131</sup>

15. Establish a healthy and comfortable **sleep environment** (HVAC, bed, bed linens, pillows).<sup>132</sup> Leah Hechtman recommends setting the temperature in the bedroom to about 66 degrees Fahrenheit (9 degrees Celsius).<sup>133</sup> Set the thermostat for what is most comfortable for you. Establish a hygienic bedroom by removing allergens and toxins. According to Naiman, the follow is classified as toxic materials that may be in your bedroom: pesticide-laden fabrics used to manufacture bedding materials, sheets, and pillow cases, synthetic materials in mattresses and pillows, polluted indoor air, outgassing (toxic chemical emissions) from paints, finishes, cleaning chemicals, and electromagnetic fields<sup>134</sup> (keep your electronic devices away from your bed).<sup>135</sup>
16. As far as possible, **limit or avoid loud noise** in your bedroom. The brain processes sound even during sleep.<sup>136</sup> Some sounds may be soothing, such as the gentle hum of a fan. If so, use your fan. However, loud and annoying sound will disrupt your sleep.

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<sup>130</sup> Ellis, PhD., Albert and Catherine Maclaren. *Rational Emotive Behavior Therapy: A Therapist's Guide, Second Edition* (Atascadero, California: Impact Publishers, 2005), 3, 15,

<sup>131</sup> Sadock M.D., Benjamin James, Virginia Alcott Sadock, M.D. and Pedro Ruiz, M.D. *Kaplan and Sadock's Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry*. Eleventh Edition (Philadelphia: Wolters Kluwer, 2015), 543.

<sup>132</sup> To summarize, keep your bedroom dark, cool, and as quiet as possible and keep electronics such as a computer, TV, and phones out of the bedroom. Exposure to stimulating objects and lights from computer and TV screens can affect levels of melatonin, a hormone that regulates your circadian rhythm.

<sup>133</sup> Hechtman, PhD, MSciMed (RHHG), BHSc, ND, Leah. *Clinical Naturopathic Medicine* (Australia: Elsevier, 2019), 1307.

<sup>134</sup> For more information on radio frequency exposure and electromagnetic field exposure, cf., <https://www.cancer.gov/about-cancer/causes-prevention/risk/radiation/electromagnetic-fields-fact-sheet>

<sup>135</sup> Naiman, PhD, Rubin. "Insomnia" in *Integrative Medicine* (New Delhi: Elsevier, 2023), 85.

<sup>136</sup> Schuler, Corey B. and Kate M. Hope. *Integrative and Functional Medical Nutrition Therapy: Principles and Practices* (Switzerland: Humana Press, 2020), 589. Emphasis mine.

17. Consider **aromatherapy** as means to aiding the relaxation processes and fostering a good night's sleep. Schuler and Hope indicate the natural essential oil lavender contains sedative properties and is beneficial for sleep therapy.<sup>137</sup>
18. **Relaxation is important** for rest and sleep. "Stress and worry interfere with sleep. Reading a good book, drinking some warm chamomile tea, or taking a warm bath before bedtime can aid in the process of relaxation that leads to sleep activation. Techniques such as visual imagery, progressive muscle relaxation, and breathing exercises can be used. Patients should not watch the clock."<sup>138</sup> So, do something relaxing prior to bedtime (bath, pleasant reading, etc.) about one hour prior to going to bed.<sup>139</sup>
19. **Calming your mind** when you are ready to fall asleep. There are several ways to calm our minds. One of the ways we can calm our minds has been named **Cognitive Shuffling**. This technique was developed by Dr. Luc Beaudoin.<sup>140</sup> Cognitive Shuffling is simply guiding our minds to focus on random *safe* images and ideas. For example, thinking about a soft summer breeze gently moving the leaves of trees or grasses. Then shift to another image or idea that may be a peaceful beach and gentle waves. Another way to shuffle through ideas and images is to use words and their letters to prompt other words that start with that letter. For example, consider the word peace. Beginning with the letter *p* and think about words that start with that same letter, e.g., purpose, peppermint, pasture, etc., and reflect passively and safely through those random images and ideas. Now think of words that begin with the letter *e*, etc.<sup>141</sup>

Another way we can calm our minds and activate the sleep cycle akin to cognitive shuffling, involves **mediating on a Scripture**. For example, consider memorizing Psalm 73:28, "But as for me, the nearness of God is good for me; I have made the Lord God my refuge, so that I may tell of all Your works." Begin by thinking about each word or phrase and why it is important to you." For example, "*As for me...* hmmm, this applies to me, or there is something important for me in this scripture." Next, "*nearness of God is good for me...* hmmm, God is close and not far away, God is close because of His love for me, or I am safe and I am cared for."

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<sup>137</sup> *Ibid.*, 589. See Lillehei AS, Halcón LL, Savik K, Reis R. *Effect of Inhaled Lavender and Sleep Hygiene on Self-Reported Sleep Issues: A Randomized Controlled Trial*. J Altern Complement Med. 2015 Jul;21(7):430-8. doi: 10.1089/acm.2014.0327. Epub 2015 Jun 2. PMID: 26133206; PMCID: PMC4505755.

<sup>138</sup> Source: <https://www.merckmanuals.com/professional/multimedia/table/sleep-hygiene>

<sup>139</sup> Sadock M.D., Benjamin James, Virginia Alcott Sadock, M.D. and Pedro Ruiz, M.D. *Kaplan and Sadock's Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry*. Eleventh Edition (Philadelphia: Wolters Kluwer, 2015), 543.

<sup>140</sup> Luc P. Beaudoin, PhD (Cognitive Science). Simon Fraser University, Faculty of Education, Cognitive Science. Dr. Beaudoin specializes in info retrieval; sleep onset, insomnolence and insomnia; mental perturbation ('affective preoccupation').

<sup>141</sup> This type of cognitive shuffling has been popularized by Dr. Joe Whittington, MD, an emergency medicine specialist in Apple Valley, CA. Dr. Whittington graduated from Saint Louis University, Health Sciences Center in 2004. He is affiliated with Kaiser Permanente Orange County-Anaheim Medical Center.

Consider watching the color variations perceived when our eyes are closed. Known as closed eye hallucinations, your mind perceives anomalous shapes or misty cloud-like images shifting and moving between dark colors and gray colors. This is caused by neurons continuing to fire in the brain<sup>142</sup> even though our eyes are closed. Sometime people see discerning shapes and occasionally flashes of light.

Finally, **pray for family and friends**. Say a simple prayer and let your mind randomly bring their names to you.

These techniques may prove effective in helping get a good night's sleep. However, if not, do some research and try other methods of calming your mind to help you call asleep.

It is very important to remember that your mind will not be calmed and therefore prompting sleep activation if you are trying to problem solve or worry when going to bed. See step 13 above. Reminder, one of the most effective means to improving our sleep patterns is doing the hard work of rigorous and regular exercise balanced with weight resistance, cardio, and metabolic conditioning.

20. Don't use the bed for things other than **sleep** or sex.

Using the bed for finishing work assignments, reading, eating, watching TV, or using your cell phone or iPad, creates the idea that your bed is *not* a place for sleep. Condition yourself to associate the bed with sleep.

21. Resist **watching the clock** and trying to sleep. If you are having difficulty going to sleep or going back to sleep, get up and go to your living room to read, work on your laptop, or journal, etc. However, you must get up at your regularly scheduled time to get out of bed in the morning. This will create fatigue but also condition your brain-body to go to sleep at the right time.

22. If you are experiencing **muscles spasms** (cramps or "charlie horses" in your legs and feet, etc.), you are deficient in electrolytes.<sup>143</sup> Take electrolyte supplements or consider using magnesium spray. Spray directly on the area where you are experiencing muscle cramps and massage the magnesium into your skin.<sup>144</sup> For some individuals with sensitive skin, magnesium spray may have a drying effect and cause mild itching. This is easily treated with lotion. Wash your hands prior to returning to bed.

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<sup>142</sup> <https://www.healthline.com/health/closed-eye-hallucination>

<sup>143</sup> Cf., *Important Diet, Nutrition, & Health Information for Clients of Christopher A. Perry, MA: A Prolepsis & Guide of Care*, June 2025.

<sup>144</sup> Example product: [https://www.amazon.com/Activation-Products-Ease-Magnesium-Spray/dp/B01C45GGZG/ref=sr\\_1\\_1\\_sspa?keywords=ease+magnesium+spray&qid=1690387967&sr=8-1-spons&sp\\_csd=d2lkZ2V0TmFtZT1zcf9hdGY&psc=1](https://www.amazon.com/Activation-Products-Ease-Magnesium-Spray/dp/B01C45GGZG/ref=sr_1_1_sspa?keywords=ease+magnesium+spray&qid=1690387967&sr=8-1-spons&sp_csd=d2lkZ2V0TmFtZT1zcf9hdGY&psc=1)

Have a good night's rest, indeed!

Christopher A. Perry  
Grace Counseling Clinic of Christ Church of Central Arkansas  
9732 Maumelle Blvd  
North Little Rock, AR 72113

**Questions?**

Email Chris at [gracecounselingclinic@gmail.com](mailto:gracecounselingclinic@gmail.com)