Rest and Sleep

Getting adequate rest and sleep is an important component of overall health and quality of life. Parkinson's disease creates many challenges to getting a good night’s rest, both for the person with Parkinson’s and the caregiver. If your loved one is not sleeping, it is highly likely that your sleep pattern will be disrupted as well.

**Bed Set-up**
There are many considerations when designing ideal sleeping arrangements for you and your loved one.

» **Choose a bed that is comfortable and conducive to sleep.**

» **Consider twin beds or sleeping in separate rooms** to ensure better rest for both you and the person with Parkinson’s.

» **Use a call button, alert system or monitor** to hear the person with Parkinson’s when sleeping in another room.

» **Use a firm mattress** to make rolling and movements easy to perform. Avoid water beds or excessively soft mattresses that hinder your loved one’s ability to roll or move.

» **The bed height needs to allow the person to get his or her feet on the floor easily.** Removing bed casters can lower the bed to a more manageable height.

» **Obtain a half side rail or bed pole** for the person with Parkinson’s to use as a sturdy hand grip when rolling or when trying to get into and out of bed.

» Rolling and moving in bed can often be made easier by using **a piece of slippery, satin-based fabric** through the middle third of the bed, so it fits under the person’s shoulders and hips.

» **Avoid flannel sheets and nightwear that add friction**: these make bed movement more difficult.

» **Remove the top sheet; instead, use a lightweight comforter** to allow the person with Parkinson’s to move more easily and prevent feet from becoming tangled.

» **Hospital beds can also be used to make adjustments more easily.** They can be raised during dressing and bathing and lowered as the person tries to get up.
Getting Into Bed
See the video CareMAP: Rest and Sleep Part 2 for a demonstration.

» Provide cues to help your loved one properly align her body when getting into bed.

» Make sure the backs of both your loved one’s legs are against the bed before sitting down.

» Help your loved one bring her legs up as she lies down, making an effort to stay in good alignment.

» Avoid having the person attempt to crawl into bed by placing a knee up on the mattress. This makes it difficult to achieve necessary alignment.

Getting Out of Bed
See the video CareMAP: Rest and Sleep Part 2 for a demonstration.

» When helping your loved one out of bed, it is usually best to start on her back, looking up toward the ceiling.

» Bend her knees, allowing feet to rest firmly on the mattress. If the person with Parkinson’s has a lot of morning stiffness, move the knees side to side from this position to help her become more flexible and ready to get up.

» Help her onto her side. Have her reach across the body to grasp the side rail or bed pole for better leverage.

» Once on the side, help her get her feet off the bed and begin to push up on the side rail or bed pole, moving to a seated position

» A physical therapist can instruct you on proper techniques to perform these transfers.

Watch the CareMAP videos
Rest and Sleep, Parts 1 and 2
Online at caremap.parkinson.org
Sleep Environment

» Make sure your loved one avoids caffeine and does not discuss stressful topics or watch loud or disturbing television programs just before bedtime.

» Set the bedroom temperature at a comfortable level.

» Try to reduce interruptions and excessive noise.

» Use recorded nature sounds or white noise to achieve a more restful environment.

» Remove objects that may cause excessive shadows or be misinterpreted in a darkened room.

» Talk to the doctor if the person with Parkinson’s has tremor, stiffness or mobility changes during the night that make it uncomfortable to sleep, or if she experiences frequent nightmares or hallucinations.