

If you're an older adult struggling to get a good night's sleep, you're certainly not alone. Many adults over 60 find that their sleep changes — sometimes dramatically. You might notice you're waking up multiple times at night, feeling sleepy earlier in the evening, or struggling to fall back asleep after a bathroom trip. While these shifts in sleep patterns are common as we age, they're not always inevitable or unstoppable. In fact, medications you take might be contributing to your insomnia without you realizing it.

Do Older Adults Really Need Less Sleep?

One common misconception is that older adults naturally need less sleep. Although sleep tends to become lighter and more fragmented with age, research consistently shows that most adults, no matter their age, still [light sleep in older age](#) need roughly **7 to 8 hours** of sleep per night for optimal health and well-being.

Instead of needing less sleep, what changes are the *quality* and *timing* of sleep. Older adults often report earlier bedtimes and earlier wake times, a shift that's tied to changes in the body's internal circadian clock. So, even if you're going to bed at 8 or 9 pm and waking up in the wee hours, it doesn't mean you're getting enough restorative sleep.

Why Does Sleep Get Lighter and More Fragmented With Age?

- **Changes in brain chemistry:** The brain's production of melatonin (the sleep hormone) declines with age, which can make falling and staying asleep harder.
- **Medical conditions:** Pain, depression, restless legs syndrome, and sleep apnea become more common and can interfere with sleep.
- **Medications:** Many prescriptions can disrupt sleep cycles or cause nighttime bathroom trips (nocturia).
- **Circadian rhythms shift earlier:** Affecting when you feel sleepy and alert.

Common Treatable Causes of Insomnia in Older Adults

Before blaming aging alone, it's important to consider treatable conditions:

1. **Sleep Apnea:** A condition causing pauses in breathing during sleep, resulting in fragmented rest and daytime fatigue.
2. **Restless Legs Syndrome (RLS):** An uncomfortable urge to move the legs, often during evenings, interfering with falling asleep.
3. **Nocturia:** Frequent nighttime urination wakes you up repeatedly.
4. **Pain:** Chronic conditions like arthritis can cause nighttime discomfort.
5. **Depression and Anxiety:** Mental health has a big impact on sleep quality.

All these conditions — and their treatment — can improve sleep drastically when addressed properly.

Medications That Affect Sleep

Here's where many people get caught by surprise: **medications you take daily for other health problems can disturb your sleep.**

Before we dive deeper, one thing I always check during caregiver or patient interviews is: *“What time are you taking your medications?”* An otherwise well-tolerated medication can cause morning grogginess or nighttime awakenings if not timed properly.



Below is a table highlighting some common classes of medications that can interfere with sleep, their typical effects, and tips for discussion with your healthcare provider or pharmacist.

Medication Class How It Affects Sleep Examples Things to Ask Your Provider or Pharmacist Beta Blockers May cause difficulty falling asleep or vivid dreams Metoprolol, Atenolol Is there a better time of day to take this? Could an alternative medication be better? Diuretics (“water pills”) Increase nighttime urination leading to sleep interruptions Furosemide, Hydrochlorothiazide Can I take this earlier in the day to avoid nighttime bathroom trips? Steroids May cause insomnia or restlessness Prednisone Is there a dosing schedule that reduces sleep impact? Antidepressants Some can be stimulating or cause vivid dreams; others may cause sedation Fluoxetine, Sertraline, Mirtazapine Does my medication affect sleep onset or cause daytime drowsiness? Parkinson’s Medications May cause vivid dreams, restless legs Levodopa, Ropinirole Could medication timing or dosage adjustment help sleep? Stimulants Delay sleep onset Caffeine, Methylphenidate Am I taking stimulants too late in the day?

Supplements and Sleep Interactions

Many older adults also take supplements to help with sleep, like melatonin or herbal products. But watch out: supplements can interact with your prescription medications or can be ineffective or have side effects, especially if taken at the wrong time.

- **Melatonin:** Best used in low doses and timed close to bedtime to support your natural circadian rhythm shift.
- **Magnesium, Valerian, or Chamomile:** These may promote relaxation but might cause daytime grogginess or interact with blood pressure or blood thinning meds.

Always talk to your pharmacist about any supplements you take. Ask specifically about **“supplements and sleep interactions”** to be sure you’re not inadvertently sabotaging your sleep or your other treatments.

Pharmacist Medication Review: Your First Step to Better Sleep

One of the best, but often overlooked, first steps is asking for a **pharmacist medication review**. Pharmacists are medication experts and can:

- Identify which of your medications might be causing insomnia or daytime grogginess
- Help adjust timing to reduce sleep disruption (for example, moving diuretics earlier in the day)
- Check for risky interactions between prescriptions and supplements
- Suggest alternative medications with less impact on sleep

Plus, pharmacists are accessible without an appointment, making them a great first stop if you suspect your meds are messing with your sleep.

Tips to Improve Sleep Without Guesswork

Along with talking to your healthcare providers about medications, here are practical, aging-friendly steps you can take right now:



- **Use a light box in the morning:** Exposure to bright light after waking can help reset your circadian clock, reducing early morning awakenings.
- **Get a motion sensor nightlight for your bedroom and bathroom:** These gentle, automatic lights reduce falls risk and prevent turning on bright overhead lights, which can disrupt melatonin production.
- **Keep a medication and sleep diary:** Write down what medications you take and when, along with your sleep patterns. This helps spot connections your providers can't guess.
- **Limit caffeine and avoid alcohol near bedtime:** Both can fragment sleep, even if you fall asleep easily at first.
- **Discuss treatable conditions:** Ask about sleep apnea testing or treatment for restless legs if you experience symptoms.

When to See a Sleep Specialist

If insomnia persists despite reviewing medications and trying lifestyle improvements, a referral to a sleep specialist might be necessary. A formal sleep study can diagnose disorders like sleep apnea or periodic limb movement

disorder, which are often missed in regular check-ups.

Remember, persistent poor sleep can worsen cognitive decline, increase fall risk, and reduce quality of life — so it's important to be proactive.

Summary: Don't Settle for "Just Getting Older" Sleep

To wrap it up:

- Older adults still need 7-8 hours of quality sleep, even if it looks different than in younger years.
- Sleep changes with age, but many causes of insomnia are treatable and shouldn't be ignored.
- Your medications — including timing and interactions with supplements — can play a big role in your sleep quality.
- Ask your pharmacist for a medication review focused on *medications that affect sleep and supplements and sleep interactions*.
- Tools like light boxes and motion sensor nightlights can help with circadian shifts and fall prevention.
- Don't hesitate to discuss sleep apnea, restless legs, pain, and depression with your healthcare provider.

Next time you find yourself wide awake at 2 a.m., try asking, "Could my prescriptions be causing this?" Then take that question to the experts who can help you get your nights back.