

IDIOPATHIC HYPERSOMNIA

Idiopathic Hypersomnia (IH), sometimes referred to as Idiopathic Hypersomnolence, is a chronic neurological sleep/wake disorder.

IH causes excessive sleep and extreme daytime sleepiness. People with IH often struggle to wake up, they sleep through multiple alarms and may even fall back to sleep several times (this is known as sleep inertia). They may start the day feeling extremely groggy, confused, disorientated, with poor motor coordination, and slowness (referred to as sleep drunkenness). They can also experience cognitive dysfunction (commonly known as 'brain fog') throughout the day ie: problems with memory, automatic behaviour, concentration and attention.

IH is a debilitating, often lifelong condition, profoundly affecting work, education, relationships, and mental health. This is particularly the case for those without support.

Most people can feel tired, fatigued and at times, excessively sleepy, particularly when they do not get enough sleep. However what sets people with IH apart is that they experience extreme sleepiness despite getting adequate or typically more than adequate hours of sleep.

Their sleep may be deep and uninterrupted but it is not refreshing. Despite extraordinary amounts of good quality sleep people with IH are in an almost constant state of sleepiness.



SYMPTOMS

The main symptom of IH is excessive deep sleep. Despite adequate and often extraordinary amounts of good quality sleep (eg: 10-11 hours or more per night) people with IH still feel excessively sleepy during the day.

- Chronic excessive daytime sleepiness often resulting in long daytime naps.
- Long and unrefreshing naps. Naps are usually more than one hour long and are typically not refreshing.
- Extreme and prolonged difficulty waking up with an uncontrollable desire to go back to sleep. Accompanied by confusion, irritability and poor coordination eg: drop things, walk into doorways. Speech may also be slow or slurred. It can also include automatic behaviour, ie: performing tasks without consciously knowing it and not remembering you have done them eg: turning off alarm clocks or answering your phone.
- Cognitive dysfunction (commonly referred to as 'brain fog'): problems with memory, automatic behaviour, concentration and attention.
- People with IH can develop ADHD like symptoms, eg: fidgeting & talking a lot, to help cope with the immense sleep pressure.
- People with IH may also experience headaches, and problems with autonomic dysfunction, eg: dizziness on standing, and temperature regulation.

DIAGNOSIS

Diagnosing IH can be difficult as excessive daytime sleepiness can be caused by various disorders and/or conditions as well as numerous medications. A comprehensive medical history and proper clinical evaluation including a thorough physical examination and medical tests are necessary to rule out all other possible causes, including insufficient sleep, psychiatric disorders, effects of medications, and medical illness.

Sleep studies involving a Polysomnography (PSG) followed immediately by a Multiple Sleep Latency Test (MSLT) are also carried out to exclude other sleep disorders such as sleep apnoea.

Unlike in other sleep disorders, the sleep in people with Idiopathic Hypersomnia is normal; there are no disturbances that can account for these symptoms.

TREATMENT & MANAGEMENT

As the cause is unknown there are no medications specifically for Idiopathic Hypersomnia. Medications used to treat Narcolepsy including stimulants and wake- promoting medications are prescribed to counter daytime sleepiness, however, there are no medications currently available that assist with cognitive dysfunction or extreme difficulty waking up and sleep drunkenness.

Stimulant and wake-promoting medications can be helpful to relieve sleepiness for some people however they are rarely effective long term. There are also potential unpleasant side effects, which can include sleep deprivation, heart problems and anxiety.

Some people with IH find a combination of medication and lifestyle changes are helpful in managing their symptoms.

Lifestyle changes can be difficult to initiate (and maintain) for people with chronic illness and may need the assistance of a specialist therapist.

Medications such as modafinil/armodafinil can interact with hormonal birth control making it less effective. Speak to your doctor for more advice.

For more information, go to the [Resources](#) page on our website to view our Factsheets on stimulant medication (eg: dexamphetamine), modafinil/armodafinil, our Top 12 Tips for Living with IH and more.

Diagnosed with Idiopathic Hypersomnia?

Hypersomnolence Australia holds the only register in Australia of people diagnosed with IH. It is used for the purpose of aiding research and to assist us to identify key areas of concern that need addressing. It also gives you the opportunity to tell us what your biggest concerns are, the hurdles you face or issues you think need attention. Please visit our [website](#) for more information.



IDIOPATHIC HYPERSOMNIA
AWARENESS WEEK®

LIVING WITH IDIOPATHIC HYPERSOMNIA

Meet others you can relate to at our regular Living with Idiopathic Hypersomnia community catch ups.

We meet monthly via Google Meet.

Please visit the [support group](#) page on our website for more information.

ABOUT US

Hypersomnolence Australia is a not for profit health promotion charity dedicated to advocating, raising awareness and providing support for central disorders of hypersomnolence, eg; Idiopathic Hypersomnia and Narcolepsy.

We do not receive funding and we do not charge membership fees. Our small staff work on a volunteer basis. Your support is vital to our continued operation.



Go to the [Get Involved](#) page on our website for ways to donate or

**DONATE
NOW**

Hypersomnolence Australia has full DGR Item 1 status. Donations are tax deductible.
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