

# Sleep & Moving in Bed

Sleep plays an important role in how you feel and function during the day. With Parkinson's, sleep can be affected in different ways and often changes over time. One common pattern is waking during the night or too early, sometimes called fragmented sleep.

Other challenges may include daytime sleepiness, medication-related sleep changes or difficulty moving in bed or getting up safely at night.

**This chapter shares practical tips and tools to help make personal care safer and easier to manage.**

## Personal care self-check

The list below highlights challenges that may develop or become more noticeable as Parkinson's symptoms change over time. Use it to help identify strategies in this chapter and guide conversations with your care team.



**Check off any that apply to you:**



Waking often during the night or too early



Feeling very sleepy or sleeping more during the day



Days and nights feel flipped



Difficulty getting comfortable or turning in bed



Trouble getting in or out of bed



Concerns about balance or falling at night



Acting out dreams or sudden movements during sleep



Skin irritation or soreness from time spent in bed



Sleep issues related to medication side effects

What other challenges have you noticed?

## Top Tips for Better Sleep

Use these tips as a guide and adjust based on your needs.



### Keep a regular sleep schedule

Going to bed and waking up at the same time each day supports a steady sleep pattern



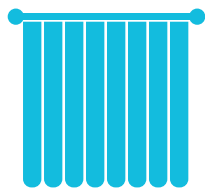
### Keep naps short and earlier in the day

Long or late naps can make it harder to fall asleep at night



### Wind down before bed

Choose calming activities and turn off screens about an hour before bedtime



### Create a sleep-friendly bedroom

A cool, dark and quiet room promotes better sleep



### Adjust the bed setup

Satin sheets and a firmer mattress can make it easier to turn and get comfortable in bed



### Talk to your doctor about sleep changes

Sleep problems can have many causes, including movement symptoms returning during the night and sleep disorders

#### Care Partner Tip

Sleep changes can affect both of you. Talk and share concerns with the care team. If you share a bed, some people use separate blankets or choose separate sleeping arrangements.

## Feeling very sleepy during the day?

Even with good sleep habits, feeling very sleepy during the day is common in Parkinson's and may become more frequent or harder to manage over time. You may find yourself napping more, having trouble staying awake or feeling like your days and nights are mixed up.

This can happen for different reasons, including:

- Broken or interrupted sleep at night
- Medications used to treat Parkinson's, especially dopamine agonists such as pramipexole, ropinirole or rotigotine, as well as other medications that can cause drowsiness, such as those for sleep, anxiety or mood
- Changes in the body's sleep-wake cycle (your internal clock), which can shift sleep toward the daytime and wakefulness at night
- Changes in sleep with aging, such as lighter or more interrupted sleep at night

If sleepiness continues, it may help to look more closely at your daily routine. The body's sleep-wake cycle is influenced by daily habits. Getting light during the day and staying active help signal the brain to stay alert, while long or late naps or caffeine later in the day can make it harder to sleep well at night and increase daytime sleepiness. Noting sleep times, naps and caffeine in a sleep log can help identify patterns.

### When to talk with your doctor

If sleepiness is frequent, comes on suddenly or affects your daily activities, your doctor can help look at possible causes and next steps. This may include adjusting medications, looking more closely at nighttime sleep or evaluating sleep conditions such as sleep apnea. In some cases, other treatments may be considered to help with daytime alertness.

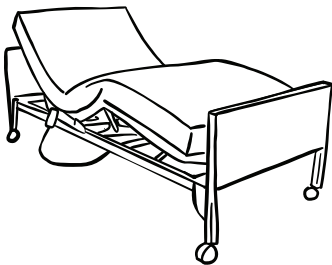


## Tools to Help with Moving in Bed

A physical or occupational therapist can help identify tools and strategies to make turning, repositioning or sitting up in bed easier.

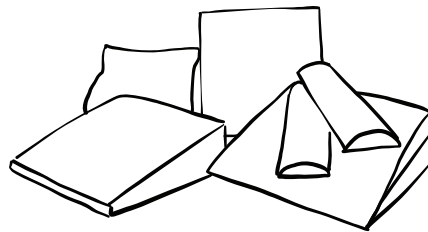
### Adjustable beds

Let you raise or lower parts of the bed to help with comfort, sitting up and getting in and out



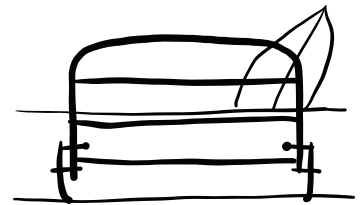
### Cushions and pillows

Elevate the upper body so it's easier to start a roll or push into sitting



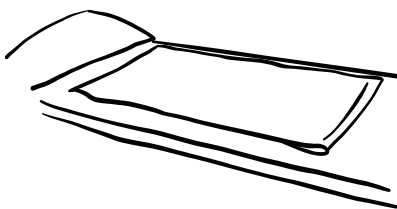
### Bed rails or poles

Provide support when turning, sitting up or getting out of bed and help reduce the risk of falls



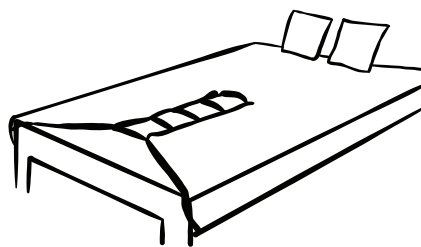
### Slide sheets

Smooth fabric placed under the body to make turning or repositioning easier



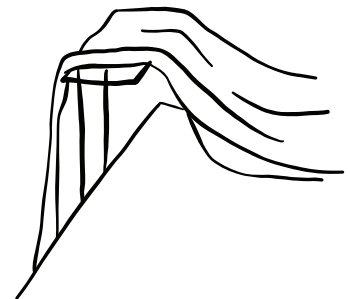
### Bed ladders

Fabric or strap ladders that attach to the bed and help you pull into a sitting position



### Blanket supports

Keep blankets off the feet to prevent tangling and make turning easier



### Care Partner Tip

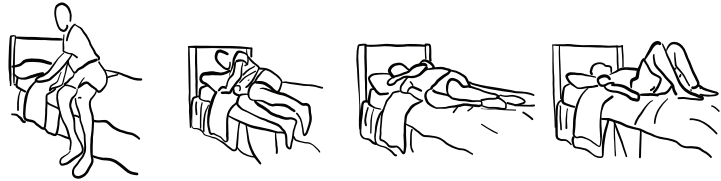
If you're helping with movement in bed, avoid pulling on arms or shoulders. Use pillows or a slide sheet to support safer movement. An occupational or physical therapist can show you techniques to make this easier and safer at home.

## How to Move in Bed

A physical or occupational therapist can teach these techniques and how to practice them safely at home.

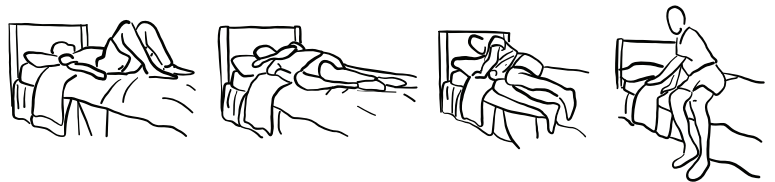
### Getting into bed

- Sit on the edge of the bed
- Lower onto your side
- Bring your legs onto the bed
- Roll onto your back



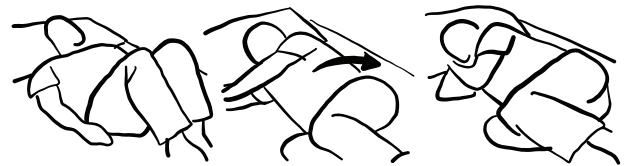
### Getting out of bed

- Roll onto your side
- Let your legs move off the bed
- Push up to sit



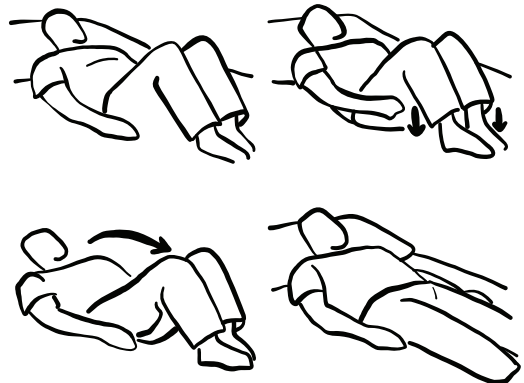
### Turning over in bed

- Bend your knees and put your feet flat on the bed
- Turn your head and reach your arm
- Let your knees fall in the direction you want to roll



### Scooting in bed

- Bend your knees and put your feet flat on the bed
- Push through your feet
- Shift your hips
- Finish in a comfortable position



# Managing Nighttime Safety Challenges

Sleep issues can lead to falls or injury at night. These tips may help:

## Getting up to use the bathroom

Keep the path clear and well lit. Sit at the bedside before standing and take your time. A bedside commode, urinal or sleeping closer to the bathroom may improve safety at night. If movement symptoms make it hard to get up, talk with your doctor about medication timing or longer-acting options.

## Acting out dreams (REM Sleep Behavior Disorder)

Remove hazards around the bed to help prevent injury. Separate blankets or sleeping separately may also help. Talk with your doctor about treatments.

## Risk of falling out of bed

Lower the bed or add padding beside it to help reduce injury. Talk with your care team before using bed rails.

## Getting tangled in bedding or equipment

Keep bedding light. Fewer layers or separate blankets may help. If you use a CPAP machine, position tubing to avoid pulling or tangling.

## Medication side effects

Some sleep medications can increase confusion or unsteadiness at night. Review your medications with your doctor.

### Skin protection in bed

Spending more time in bed can increase the risk of skin breakdown. Change positions regularly. Check skin daily and talk with your care team about redness or positioning support.

## Helpful Resources

Learn more about sleep in Parkinson's (including common sleep disorders) at [Parkinson.org/Sleep](https://www.parkinson.org/Sleep).

Watch CareMAP video on rest and sleep for practical tools and tips designed for care partners at [Parkinson.org/CareMAP](https://www.parkinson.org/CareMAP).