

FOR YOUR PRACTICE

Lawyers Concerned for Lawyers Sleepless in Methuen

Q. I have just about managed my career (intellectual property law) and home life (now including two wonderful but demanding young kids) over the decade or so since I was admitted to the bar. I can be a driven person, who needs to have things “under control,” but my approach to life was more or less working, until I recently separated with my husband because of his drinking. Now I barely sleep, not only because of the kids and things I have to get done for work, but because I can’t stop thinking about how my life is changing, how my ex and I will manage as co-parents, my disappointment that I was not important enough to him to make more of an effort, etc. I’ve been cranky around friends and coworkers, and almost feel ready for a nervous breakdown. I’ve also made two significant (but fortunately reversible) errors on key documents in the past week.

A. Despite decades of predictions that technology would bring us lives of leisure, the trend seems to have been the opposite — we expect more of ourselves, and have less and less time for basic needs, like sleep. In fact, the trend toward decreased sleep dates back to the advent of the light bulb (not at all surprising, when you think about it). And more than in the past, when we face crises in our home lives we often have to juggle them alongside career pressure. So it is not hard to understand your susceptibility to insomnia.

Yet a decent amount of sleep is crucial for healthy functioning, and your sleep deprivation absolutely is at least one factor contributing to your irritability and cognitive inefficiency. The more sleep a person loses, the more susceptible she is to depression, memory impairment, pain, immune deficiency, accidents and even psychosis (which can include hallucinations or delusions) — compounding the problems you were already facing. It is definitely worth doing something about your sleep deprivation, but what?

Psychotherapy/counseling: If you are not already talking to someone with whom you can be completely open about the strains you face, this would be our first recommendation, and although it probably

won’t make you sleep like a baby, there is a good chance you’ll feel some relief and be better able to unwind.

Lifestyle changes: These may include (a) using the bed only for sleep; (b) getting exercise about four hours before bedtime; (c) employing relaxation techniques; and/or (d) using cognitive strategies to help interrupt or turn down the volume on those ruminations that keep your mind cranking.

Medication: If the above approaches are not enough, there are of course medications that aid sleep. Before moving to the most potent ones (since they also can, for some people, cause problematic side effects or become addictive), you could start by trying melatonin or over-the-counter sleep aids (which are essentially drowsiness-inducing antihistamines). Trazodone is a commonly doctor-prescribed medication that is non-addictive, but for some it induces a degree of grogginess that might either stay with you in the morning or prevent you from being sufficiently responsive to the kids at night (so the best way to give it an initial try would be when a friend or relative is staying over). It is also possible that you might benefit from an antidepressant (not only with regard to sleep but other symptoms such as tearfulness, decreased concentration, decreased ability to enjoy your interactions with the kids, etc.). Those take longer to work, but can be considered, perhaps after trying the other measures we have already discussed.

If you could use input or assistance in finding resources for any of the above (including the huge issue of alcoholism in the family, on which we have not focused in this answer), feel free to confer with any LCL clinician — that’s what we’re here for. ■

Questions quoted are either actual letters/emails or paraphrased and disguised concerns expressed by individuals seeking assistance from Lawyers Concerned for Lawyers. Questions for LCL may be mailed to LCL, 31 Milk St., Suite 810, Boston, MA 02109; emailed to email@lclma.org or called in to (617) 482-9600. LCL’s licensed clinicians will respond in confidence. Visit LCL online at www.lclma.org.