DOI: 10.32474/OJNBD.2018.01.000111

ISSN: 2637-6628 **Editorial**

Understand the Insomnium



Miranda Nava Gabriel*

Neurologist and Clinical Neurophysiologist, Chief of Neurology of the Hospital Center of the Presidential General Staff, Mexico

*Corresponding author: Gabriel Miranda Nava, Neurologist and Clinical Neurophysiologist, Attached to the Hospital Center of the Presidential General Staff, Master in Public Health, Doctor in Administration and Public policies, Mexico

Editorial

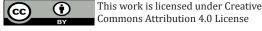
In the international classification of sleep disorders we place insomnia as the first point, which we define as the inability to initiate, maintain or even consolidate sleep; this is best explained in the following paragraphs. When we arrived at the bed we put on our sleepwear, some pyjamas, other rompers, and the least with underwear to feel comfortable; the TV goes off, we kiss good night and turn off the light, and that's when it starts, if man, that difficulty to fall asleep immediately, to see the roof, hear the horn of the passing truck and not be able to finish that moment of every day; and go that one despairs, we get bad and the time passes until eleven or even twelve, even more, of the night and that is when we can finally close our eyes, which I do not even tell dear reader the obviousness of the next day he is sleepy during working hours; it is what is called insomnia of onset.

Well, well, but he could sleep and start enjoying his dream, but suddenly, without just cause, so out of nowhere he wakes up one, two or three times in the night, just by opening his eyes, and above all accompanied by Think, and think, and think, what do you think about? In whatever: that the payment of those horrible things called tuition, other less beautiful calls alimony, or the classic car letters, undelivered work, together with the boss the next day, exams, legal circumstances in general; you just met the intermediate or maintenance insomnia. It's okay, he could sleep and more or less

reached a good quality of sleep, but always in the early morning, at a time that is not of God, like 3 or 4 in the morning, he wakes up and cannot for any reason to go back to sleep, and feel worse than bad, anxious, badly rested and knowing from within that he will not go back to sleep in what remains of the time in bed; We now know about insomnia of consolidation, late or terminal.

These in turn can be classified by their duration in transient, when it does not exceed two weeks; acute when it is greater than two weeks but less than six months and chronic when it exceeds six months.

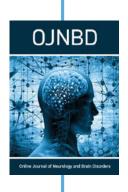
In the world there are about 10% of the adult population who suffer from insomnia, of them more than half use drugs that help in their treatment as hypnotics, antidepressants or sedatives; The consequences of insomnia in any of its varieties translates into fatigue, concentration difficulties, increased incidence in work accidents, irritability, gastrointestinal disorders and increased behaviour problems. The treatment is based on treating the cause that triggers said insomnia, including removing the factor that causes stress, exercise, eating habits with weight control and measures of sleep hygiene; The drug must be at the discretion of the attending physician.



Commons Attribution 4.0 License

To Submit Your Article Click Here: Submit Article

DOI: 10.32474/OJNBD.2018.01.000111



Online Journal of Neurology and Brain Disorders

Assets of Publishing with us

- Global archiving of articles
- Immediate, unrestricted online access
- Rigorous Peer Review Process
- **Authors Retain Copyrights**
- Unique DOI for all articles