



To News Editor
For Immediate Release

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Hidden and Dangerous Parasomnias in Psychiatric Outpatients

Sleep complaints are common among patients suffering from mental illness. Parasomnia is a group of sleep disorders that could manifest as sleepwalking, movement and other complex activities during sleep with consequent sleep disruptions and sleep related injuries.

The Department of Psychiatry at The Chinese University of Hong Kong (CUHK) conducted a clinical epidemiological study in the Li Ka Shing Specialist Clinic of Prince of Wales Hospital on 1,200 psychiatric outpatients from 2006 to 2007. The study investigated the prevalence rate and the associated factors of some movement-related parasomnias in patients with psychiatric illnesses, including sleepwalking, sleep related eating disorder (SRED), REM sleep behavioral disorder (RSBD) and sleep related injuries. The result of this study was recently published in *Journal of Clinical Psychiatry*.

The study found that the lifetime prevalence rate of these parasomnias ranged from 4.0% to 8.5% in the psychiatric outpatients. In fact, most of the patients were not fully aware of the attacks or did not reveal the problems to their doctors. Some of them reported adverse outcomes including sleep related injuries and violence to themselves and bed-partners, weight gain and dangerous activities like cooking under impaired consciousness. Depressive illness, concurrent sleep disturbances like insomnia, snoring and recurrent nightmares, some antidepressants and hypnotics were found to be associated with these parasomnias. Among various psychiatric medications, newer antidepressants (Selective Serotonin Reuptake Inhibitor, SSRI) were associated with increased prevalence of RSBD and 1 out of 20 patients taking SSRI might develop such condition. For SRED, 1 out of 7 subjects taking the hypnotics (Zolpidem) regularly might experience sleep related eating behavior.

Although these parasomnias were shown to be associated with depression and certain psychiatric medications, the exact aetiologies were complex and direct causal relationship had not yet been fully established. Early detection and appropriate investigations would be needed for those who were suspected to have such conditions. Interventions including optimization of underlying mental illnesses, change of drug regime and home safety could modify these conditions and reduce risk of sleep related injuries and other undesirable consequences.

Characteristics of various parasomnias

A. Sleepwalking

1. Ambulation during sleep
2. Altered state of consciousness
3. Difficulty in arousing the person, mental confusion when awakened, amnesia (complete or partial), dangerous or potentially dangerous behavior

B. Sleep related eating disorder

1. Recurrent episodes of involuntary eating and drinking during sleep
2. Other features include:
 - i) Consumption of peculiar forms or combinations of food
 - ii) Sleep disruption
 - iii) Dangerous behavior or injury while in pursuit of food or cooking food
 - iv) Weight gain
3. Altered state of consciousness

C. REM sleep behavioral disorder

1. Parasomnia during REM sleep
2. Limb or body movement associated with dream mentation
3. Complaint of violent or injurious behavior during sleep



致新聞編輯
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「異類睡眠症」與情緒病及精神科藥物之關係

「異類睡眠症」(Parasomnia) 是一種睡眠疾病，患者會在睡眠期間出現異常行為，例如睡遊（夢遊）、睡食或其他複雜的行為。「異類睡眠症」不但影響睡眠質素，更可以引致患者或同睡者受傷。

香港中文大學（中大）精神科學系於 2006 至 2007 年間，在沙田威爾斯親王醫院李嘉誠專科診所精神科門診部門進行了一項有關「異類睡眠症」的研究，包括睡遊、睡食、快速眼動睡眠行動障礙症（發夢期夢遊）及因「異類睡眠症」受傷的患病率和有關因素。超過 1,200 名病人參與是項研究。研究報告剛刊載於國際醫療期刊 *Journal of Clinical Psychiatry*。

研究指出，情緒病患者出現「異類睡眠症」的終生患病率約為 4% 至 8.5%。患者在發病期間往往處於不清醒狀態而未能自我察覺，又或者沒有告知醫生。因此，「異類睡眠症」可引致患者或同睡者受傷、睡眠暴力，以及其他危險行為，如在不清醒期間烹調食物。其他後遺症包括由於過度進食而引致體重增加等問題。研究亦發現，「異類睡眠症」較常見於情緒病患者及同時有其他睡眠問題如失眠、打鼻鼾及發惡夢等的病人身上。而服食某類抗抑鬱或安眠藥物亦會增加患上「異類睡眠症」的機會，例如每 20 個服用新式抗抑鬱藥 (Selective Serotonin Reuptake Inhibitor, SSRI) 的病人便可能有 1 個有發夢期夢遊的徵狀；而每 7 個長期定時服用安眠藥 (Zolpidem) 的病人便有 1 個有機會患上睡食症。

縱使「異類睡眠症」與情緒病及精神科藥物有一定的關係，唯發病成因相當複雜，確切的成因仍然有待進一步研究。若病人出現「異類睡眠症」的徵狀，應盡早告知醫生，並作出適當的評估。及早發現「異類睡眠症」並進行治療，包括醫治情緒病、藥物調較及睡眠安全措施等，可大大減低病情的影響。

簡介「異類睡眠症」

A. 睡遊（夢遊）

1. 在深層睡眠期間（NREM Sleep 慢波睡眠）有異常行動
2. 在夢遊期間，患者會處於不清醒狀態
3. 他們很難被喚醒，即使被喚醒，亦會處於混亂狀態。他們在完全清醒後，會對於夢遊期間所發生的事記憶模糊，甚至完全失憶

B. 睡食症

1. 在睡眠期間有不自主的飲食行為
2. 其他特徵包括：
 - i. 在發病期間進食大量、不同種類或奇特的食物
 - ii. 因重複進食而引致失眠
 - iii. 在進食或煮食時引致危險
 - iv. 體重上升
3. 如夢遊病般處於不清醒狀態

C. 快速眼動睡眠行動障礙症（發夢期夢遊）

1. 快速眼動睡眠（REM Sleep 發夢期）期間的異類睡眠症
2. 隨着夢境作出異常行動
3. 作出暴力行為，可引致患病或同睡者受傷

二零零八年九月十八日