



**“ Sometimes I sleep as little as 3 or 4 hours each night. I have to take naps during the day to keep up. ”**

- Helen,  
Hypothetical Patient

## FIRST APPOINTMENT: HELEN THINKS HER PAIN MAY BE DISRUPTING HER SLEEP.

Helen is a 72-year-old retiree who recently had knee surgery.

### Appointment topics:

- Helen has struggled with waking up too early since menopause, and it became worse after her knee surgery.
- Her husband is concerned that Helen doesn't seem like herself; she doesn't have as much energy to keep up with her grandchildren.

### Physician's assessment:

- To help with the pain, the physician suggests starting physical therapy and schedules a follow-up appointment.



### 3 MONTHS LATER:

Helen's knee pain has yet to resolve.

### Appointment topics:

- Helen is still struggling with pain in her knee, despite trying physical therapy. She also hasn't been getting optimal sleep nearly every night.
- She's experiencing daytime sleepiness, leading her to cancel on friends because she doesn't have the energy.

### Physician's assessment:

- The physician advises Helen to see a specialist to resolve her knee pain.

### Clinical considerations when evaluating a patient like Helen:

- In your opinion, would it have been helpful to discuss Helen's sleep difficulties earlier during menopause, prior to her knee surgery, in order to consider her sleep issues independently from her knee pain?
- Do you feel that Helen has insomnia disorder?
- Given Helen's medical history, what insomnia treatment option(s) would you consider that may result in minimal next-day effects?



### 5 MONTHS LATER:

Sleep is still an issue for Helen.

### Appointment topics:

- Helen's knee pain has mostly resolved, but she is still waking up too early without being able to fall back asleep.
- She also finds that she can't remember certain things, such as what time she was supposed to take her grandchildren to the park.