



## SLEEP PARALYSIS

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Sleep paralysis is the loss of voluntary body and speech control in the period between wakefulness and sleep.

Sleep paralysis occurs as the patient is falling asleep or waking up. It is normal for the body to be paralysed during sleep as this prevents people acting out their dreams and putting themselves in danger. As the patient transitions between sleep and wake however, the body may remain paralysed whilst the mind awakens. This leads to the frightening sensation of not being able to move or speak despite trying to. The sensation is often accompanied by sensory hallucinations or vivid dreams.



Interestingly, this condition has featured in the superstition and folklore of many cultures through history. It has been blamed on witchcraft, features in Shakespeare's writing and more recently is thought to be the explanation for so-called 'alien abductions'. There is more about this on the page on Sleep Paralysis on Wikipedia.

We now have a scientific explanation for it and know that sleep paralysis is alarming, but is generally short-lived and not dangerous.

### **Who does it happen to?**

It is a normal phenomenon and most people will experience it on occasions. It usually begins in adolescence.

### **Investigations:**

There are no tests required if it is an isolated problem. If the patient has other related problems, particularly daytime sleepiness, or losing muscle strength (cataplexy) they should have further tests.

### **Treatment:**

There is usually no treatment necessary. Sleep paralysis appears to happen more frequently in the supine (face up) position, so this could be avoided. Avoiding sleep deprivation is also of benefit. Patients who experience this regularly may benefit from having strategies to wake up. This may be relaxation with attempts to move small muscles first, or alerting partners to wake the patient if they notice the patient attempting to speak or move. If the patient has significant psychological stress from the sensation they should discuss this with their doctor.