

Is sleep alliance the cure to nighttime issues?

Television host Carson Daly is the latest celebrity to try what some call sleep divorce. Couples who sleep in the same bed but are not getting that coveted seven to eight hours of shut eye will slumber with some degree of separation: in the same bed but with separate blankets, in separate beds in the same room or in separate rooms.

Daly called the move the “best thing” for his marriage during a summer episode of the Today Show.

“We both, admittedly, slept better apart,” he said.

The concept is one worth exploring for couples who are kept up by snoring, restlessness, differences in sleep schedule or other nighttime issues, says [Nadeem Ahmed, MD](#), a pulmonologist at OSF HealthCare in [Alton, Illinois](#).

But let’s get one thing straight.

“I don’t like the term ‘sleep divorce’ because it tends to blame other people. It’s not a good word. It brings anxiety,” Dr. Ahmed says.

“I like to use ‘sleep alliance.’ They’re working together. They’re working things out. They want to make sure it’s healthy for both bed partners and the sleep disturbances don’t affect the other partner’s life,” he says.

Have the discussion

Dr. Ahmed says he encounters sleep issues, like snoring, in his practice “almost every day,” and many people are shy about it.

Every case is different. Dr. Ahmed says couples should first talk out their sleep issues and try to find a solution. The partners could try sleeping in separate beds during the week and in the same bed on the weekend so intimacy is not completely lost. Some mattresses have different firmness, temperature and slant on each side, which can help.

If needed, the partners should talk to a pulmonologist or psychologist.

“A lot of psychologists will do similar things that a physician will do. It’s just the comfort level of the person,” Dr. Ahmed explains. “Sometimes they don’t want to go to a medical doctor for the sleep problem. They would rather talk to a psychologist.”

“The idea is to discuss it with *some* type of professional,” he says.

Dr. Ahmed adds that sleeping separately should be a short-term solution.

“Tell your bed partner this is an issue, and we need to address it. As opposed to just getting mad or feeling crummy or sleepy the next day,” Dr. Ahmed says, “Because it can affect your job, like if you’re a machine operator or have to drive a truck.”

A major cause

Dr. Ahmed says a big cause of the restlessness that leads to sleep alliance discussions is [sleep apnea](#), when people stop breathing during sleep. This can lead to loud snoring or body movement in bed and crabbiness or grogginess the next day.

Dr. Ahmed says there are two types of sleep apnea: obstructive and central. Obstructive sleep apnea is a product of obesity. Central sleep apnea is associated with neurological deficits like a stroke.

“[Sleep apnea] is not fatal because our brains are hard-wired to let you go to a certain time, and then it triggers you to take a breath,” Dr. Ahmed explains.

But, if the condition is left untreated, there is a litany of possible issues: hypertension, cardiac arrhythmia, diabetes, dementia, headaches and frequent urination.

Diagnosis of sleep apnea would involve a sleep study, either in your home or at a hospital.

Treatment options include a mask and machine combination known as a CPAP or BiPAP, a [mouth guard](#) or a small device that’s implanted in your body in outpatient surgery. All those options aim to help you breathe normally and sleep peacefully.

“Along with that, we have to stress lifestyle changes,” to rid oneself of sleep apnea, Dr. Ahmed adds. “Eating healthy. Losing weight. Getting exercise.”

Over-the-counter options for better sleep include melatonin, an eye mask, earplugs, thick window curtains, a plush mattress and sheets and a white noise device like a smart speaker. Don’t eat or drink, aside from water, a couple hours before bedtime, Dr. Ahmed also advises.

Learn more

Learn more about healthy sleep on the [OSF HealthCare website](#). If you’re having sleep problems, especially if it’s impacting your daytime life, talk to your primary care provider, a pulmonologist or a behavioral health provider.