



EDITOR'S CHOICE

Sleep—a panacea?

Fiona Godlee *editor in chief*

The BMJ

Sleep (or lack of it) is back in fashion. Two recent books, *Why We Sleep* by neuroscientist Matthew Walker and *The Business of Sleep* by clinical psychologist Vicki Culpin, warn in the strongest terms that regularly sleeping less than seven hours a night is a disaster for our mental and physical wellbeing.

As a culture, we in rich countries are in the throes of what Culpin calls “an epidemic of sleeplessness,” increasing our risk of depression, anxiety, dementia, stroke, heart disease, obesity, cancer, diabetes, and road traffic crashes. Walker describes “low level exhaustion” as the accepted norm, with the same dire consequences, especially bad for night owls and for teenagers forced to function against their natural circadian rhythms.

Sleep deprivation has long been a normal part of life for doctors, worn as a badge of pride by some but increasingly recognised as harmful both to doctors and to patients. Last year Paul Grieg and Rosamund Snow concluded that fatigue was a major risk factor for mistakes and poor decision making and that people are not good at assessing their own levels of fatigue (doi:10.1136/bmj.j5107). They called on doctors to look for warning signs in themselves and their colleagues and for organisations to take more responsibility for how much fatigue an employee accumulates.

Hospital trusts may be forced to ensure regular four hourly breaks if legal action being brought by a group of junior doctors is successful (doi:10.1136/bmj.k852). And calls for better oversight by medical directors will intensify as more information emerges about the intense unbroken and under-supported 13 hour shift endured by Hadiza Bawa-Garba, criminally convicted and struck off over the death of Jack Adcock (bmj.com/bawa-garba). Margaret McCartney speaks for many of us when she writes, “Pinning blame on one person allows us to believe that the bad apple has been removed from the barrel and that all is now well. But this is a system issue. It’s the barrel that’s the problem.” (doi:10.1136/bmj.k812)

Making a better barrel must include better understanding of how to minimise sleep debt among those working night shifts. Helen McKenna and Matt Wilkes (doi:10.1136/bmj.j5637) give an evidence based sleep strategy for night shifts, including a cut-out and keep infographic to pin on your wall.

Follow Fiona on Twitter @fgodlee

Published by the BMJ Publishing Group Limited. For permission to use (where not already granted under a licence) please go to <http://group.bmj.com/group/rights-licensing/permissions>