

Little or poor sleep may be associated with worse brain function when aging

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Credit: xiaphias/Wikipedia

Research published today in *PLOS ONE* by researchers at the University of Warwick indicates that sleep problems are associated with worse memory and executive function in older people.

Analysis of sleep and cognitive (brain function) data from 3,968 men and 4,821 women who took part in the English Longitudinal Study of Ageing (ELSA), was conducted in a study funded by the Economic and Social Research Council (ESRC). Respondents reported on the quality and quantity of sleep over the period of a month.

The study showed that there is an association between both quality and duration of sleep and brain function which changes with age.

In adults aged between 50 and 64 years of age, short sleep (8hrs per night) were associated with lower brain function scores. By contrast, in [older adults](#) (65-89 years) lower brain function scores were only observed in long sleepers.

Dr Michelle A Miller says "6-8 hours of sleep per night is particularly important for optimum brain

function, in younger adults". These results are consistent with our previous research, which showed that 6-8 hours of sleep per night was optimal for physical health, including lowest risk of developing obesity, hypertension, diabetes, heart disease and stroke".

Interestingly, in the younger pre-retirement aged adults, [sleep quality](#) did not have any significant association with brain function scores, whereas in the older adults (>65 years), there was a significant relationship between sleep quality and the observed scores.

"Sleep is important for good health and mental wellbeing" says Professor Francesco Cappuccio, "Optimising sleep at an older age may help to delay the decline in [brain function](#) seen with age, or indeed may slow or prevent the rapid decline that leads to dementia".

Dr Miller concludes that "if [poor sleep](#) is causative of future cognitive decline, non-pharmacological improvements in [sleep](#) may provide an alternative low-cost and more accessible Public Health intervention, to delay or slow the rate of cognitive decline".

Provided by University of Warwick

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