

# Why We Need Sleep: How Sleep Loss Affects Alertness and Performance

Christopher W. Jones, PhD, Marc Kaizi-Lutu, Mathias Basner (Department of Psychiatry, Perelman School of Medicine, University of Pennsylvania)

## Recommended amount of sleep and prevalence of insufficient sleep

To maintain well-being and alertness throughout the day, it is important to get a good night of sleep. It is recommended that U.S. adults sleep between 7-9 hours each day (it is recommended that adolescents and children sleep longer).<sup>1-3</sup> However, ~30% of U.S. adults report sleeping less than the recommended amount.<sup>4</sup> A variety of factors can influence the timing and duration of sleep. Typically, people tend to trade sleep for the demands of work or a job, traveling, engaging in personal or family time, and social activities.<sup>4-6</sup>

One common pattern for working adults is to restrict sleep during the week (when work and family demands are high) and sleep more on the weekend to recover.<sup>5,7,8</sup> Although vulnerability to the adverse effects of sleep loss differs from person to person, this sleep-wake pattern may lead to an overall lack of sleep.<sup>9,10</sup> In this brief paper, we will use this common sleep-wake pattern to illustrate *how* sleep loss impairs behavioral alertness and performance. We will also discuss the science behind the restorative benefits of recovery sleep and how to manage fatigue.

#### Tired and slow to respond? How sleep loss affects behavioral alertness and performance

Before we discuss *how* sleep loss affects behavioral alertness and performance, we first need to provide some background on sleep regulation and define both behavioral alertness and performance.

Sleep is regulated by 2 processes: a homeostatic process and a circadian process (circadian rhythm). The sleep homeostatic process tracks your sleep-wake history and the intensity of wakefulness (essentially, how long you have been awake and how active you were). The circadian process is a network of biological clocks that control your daily biological rhythms.<sup>11-13</sup> These 2 processes interact to influence your behavioral alertness and performance. Behavioral alertness refers to vigilant attention: your ability to quickly respond to a stimulus (e.g., something you hear or see). Performance refers to how you do on a cognitive task: how quickly and accurately you respond to a stimulus. Vigilant attention is often measured by performance



on the Psychomotor Vigilance Test.<sup>14-17</sup> These 2 processes also impact your subjective levels of sleepiness and fatigue. Subjective sleepiness/fatigue can be measured using surveys and/or questionnaires.<sup>18-20</sup>

Sleep can be lost in different ways. Sleep can be lost *acutely*. Acute sleep loss occurs when sleep is deprived for a continuous period (e.g., overnight) that results in over 16 hours of wakefulness (total sleep deprivation). Sleep can also be lost *chronically*. Chronic sleep loss occurs when sleep periods are consistently shorter than the recommended amount (chronic sleep restriction). Chronic sleep loss over days or weeks is the most common type of sleep loss. However, acute sleep deprivation occurs in some professions with 24/7 operations that require workers to stay awake for extended periods (e.g., military personnel and healthcare professionals).<sup>20</sup>

Regardless of *how* sleep is lost, the more sleep that is lost, the greater the deficits in behavioral alertness and performance.<sup>21,22</sup> For example, consider a 5-day work week where you only sleep 6 hours each night. This would result in a steady build-up of decrements in vigilant attention and increasing ratings of sleepiness and fatigue. These consequences would worsen with each subsequent night of sleep loss.<sup>21,22</sup> If you only slept 4 hours each night, the build-up of behavioral alertness and performance deficits would be greater and quicker. If you continued this for 2 weeks, your behavioral alertness levels would be the same as if you stayed awake for 3 consecutive nights (64-88 hours of total sleep deprivation)!<sup>22,23</sup> During the work week, you would experience difficulty staying awake as your physiological sleepiness increases.<sup>24,25</sup> Studies have shown that subjective measures of behavioral alertness are significantly lower than objective measures. In other words, people tend to think they aren't as impaired as they actually are. Underestimating your actual level of fatigue or vigilance could increase your risk of an accident.<sup>22,26</sup>

Sleep loss impairs many domains of behavioral and cognitive performance,<sup>27-29</sup> such as:

- The ability to learn new tasks and information, as well as the ability to store and manipulate information
- Long-term memory recollection and the ability to convert short-term memories to long-term memories
- Decision making and avoiding risk
- Emotion regulation and maintaining emotional composure under pressure





## Can you recover from sleep loss and how long does it take?

Scientists still aren't sure how much sleep you need to recover from sleep loss. It is still being investigated! Studies suggest that multiple days of recovery sleep are needed to restore your behavioral alertness and performance to well-rested levels after a prolonged period of sleep loss. On the first night of recovery sleep, the amount your behavioral alertness and performance improves is directly related to the amount you sleep. However, it appears that the improvements stop increasing after 10 hours of recovery sleep.<sup>24</sup> Importantly, 1 night of recovery sleep is not enough to restore you to well-rested levels. This may take multiple days, during which you may be more susceptible to further sleep loss.<sup>21,30-32</sup> Also, if you consistently get good sleep prior to sleep loss, you may be less impacted by sleep loss. This concept is known as banking sleep.<sup>30,33</sup>

#### Once you are deprived of sleep, how can you improve your behavioral alertness?

The news is not all bad! If your behavioral alertness and performance are struggling due to insufficient sleep, there are things you can do to help. The most effective way to increase behavioral alertness and reduce fatigue is to take a nap.<sup>20,34</sup> A short nap (30-45 minutes) can mitigate the effects of sleep loss. Short is important! If you sleep too long, you may experience sleep inertia when you awake. Sleep inertia is excessive grogginess.<sup>20</sup> If you experience sleep inertia after a nap, caffeine can help. Caffeine can reduce sleep inertia and is also an effective tool to promote behavioral alertness and performance during sleep loss. Importantly, caffeine does not mitigate all negative effects of sleep loss.<sup>34,35</sup> Finally, appropriately timed bright light, enriched with spectral blue light, exposure can improve behavioral alertness, providing a short-term boost in performance.<sup>36</sup> While these countermeasures can improve behavioral alertness and performance, they are not a substitute for consistent healthy sleep over time.<sup>20,36</sup>





## Suggested/Additional Reading

Banks S, Dinges DF. Behavioral and physiological consequences of sleep restriction. *Journal of Clinical Sleep Medicine*. 2007; 3(5):519-528.

Lowe CJ, Safati A, Hall PA. The neurocognitive consequences of sleep restriction: A metaanalytic review. *Neuroscience & Biobehavioral Reviews*. 2017; 80:586-604.

Basner M, Rao H, Goel N, Dinges DF. Sleep deprivation and neurobehavioral dynamics. *Current Opinion in Neurobiology*. 2013; 23(5):854-863.

Caldwell JA, Caldwell JL, Thompson LA, Lieberman HR. Fatigue and its management in the workplace. *Neuroscience & Biobehavioral Reviews*. 2019;96:272-289.





#### REFERENCES

- Watson NF, Badr MS, Belenky G, et al. Joint consensus statement of the American Academy of Sleep Medicine and Sleep Research Society on the recommended amount of sleep for a healthy adult: Methodology and discussion. *Sleep*. 2015;38(8):1161-1183. doi:10.5665/sleep.4886
- Watson NF, Badr MS, Belenky G, et al. Recommended amount of sleep for a healthy adult: A joint consensus statement of the American Academy of Sleep Medicine and Sleep Research Society. *Sleep.* 2015;38(6):843-844. doi:10.5665/sleep.4716
- 3. Hirshkowitz M, Whiton K, Albert SM, et al. National Sleep Foundation's updated sleep duration recommendations: Final report. *Sleep Health*. 2015;1(4):233-243. doi:10.1016/j.sleh.2015.10.004
- 4. Basner M, Dinges DF. Sleep duration in the United States 2003–2016: First signs of success in the fight against sleep deficiency? *Sleep*. 2018;41(4):zsy012. doi:10.1093/sleep/zsy012
- 5. Basner M, Fomberstein KM, Razavi FM, et al. American time use survey: Sleep time and its relationship to waking activities. *Sleep*. 2007;30(9):1085-1095. doi:10.1093/sleep/30.9.1085
- 6. Basner M, Dinges DF. Dubious bargain: Trading sleep for Leno and Letterman. *Sleep*. 2009;32(6):747-752. doi:10.1093/sleep/32.6.747
- Holding BC, Sundelin T, Schiller H, Åkerstedt T, Kecklund G, Axelsson J. Sleepiness, sleep duration, and human social activity: An investigation into bidirectionality using longitudinal time-use data. *Proceedings of the National Academy of Sciences*. 2020;117(35):21209-21217. doi:10.1073/pnas.2004535117
- 8. Petersen H, Kecklund G, D'Onofrio P, Axelsson J, Åkerstedt T. Thank god it's friday Sleep improved. *Journal of Sleep Research*. 2017;26(5):567-571. doi:10.1111/jsr.12538
- 9. Tkachenko O, Dinges DF. Interindividual variability in neurobehavioral response to sleep loss: A comprehensive review. *Neuroscience & Biobehavioral Reviews*. 2018;89:29-48. doi:10.1016/j.neubiorev.2018.03.017
- 10. Van Dongen HPA, Baynard MD, Maislin G, Dinges DF. Systematic interindividual differences in neurobehavioral impairment from sleep loss: Evidence of trait-like differential vulnerability. *Sleep*. 2004;27(3):423-433. doi:10.1093/sleep/27.3.423
- 11. Borbély AA. A two process model of sleep regulation. *Human Neurobiology*. 1982;1(3):195-204.
- 12. Borbély AA, Achermann P. Sleep homeostasis and models of sleep regulation. *Journal of Biological Rhythms*. 1999;14(6):559-570. doi:10.1177/074873099129000894
- 13. Deboer T. Sleep homeostasis and the circadian clock: Do the circadian pacemaker and the sleep homeostat influence each other's functioning? *Neurobiology of Sleep and Circadian Rhythms*. 2018;5:68-77. doi:10.1016/j.nbscr.2018.02.003





- Hudson AN, Van Dongen HPA, Honn KA. Sleep deprivation, vigilant attention, and brain function: a review. *Neuropsychopharmacology*. 2020;45(1):21-30. doi:10.1038/s41386-019-0432-6
- 15. Basner M, Dinges DF. Maximizing sensitivity of the psychomotor vigilance test (PVT) to sleep loss. *Sleep*. 2011;34(5):581-591. doi:10.1093/sleep/34.5.581
- Basner M, Mollicone D, Dinges DF. Validity and sensitivity of a brief psychomotor vigilance test (PVT-B) to total and partial sleep deprivation. *Acta Astronautica*. 2011;69(11-12):949-959. doi:10.1016/j.actaastro.2011.07.015
- 17. Dinges DF, Powell JW. Microcomputer analyses of performance on a portable, simple visual RT task during sustained operations. *Behavior Research Methods, Instruments, & Computers.* 1985;17(6):652-655.
- 18. Banks S, Dinges DF. Behavioral and physiological consequences of sleep restriction. *Journal of Clinical Sleep Medicine*. 2007;3(5):519-528. doi:10.5664/jcsm.26918
- 19. Åkerstedt T, Gillberg M. Subjective and objective sleepiness in the active individual. *International Journal of Neuroscience*. 1990;52(1-2):29-37. doi:10.3109/00207459008994241
- 20. Caldwell JA, Caldwell JL, Thompson LA, Lieberman HR. Fatigue and its management in the workplace. *Neuroscience & Biobehavioral Reviews*. 2019;96:272-289. doi:10.1016/j.neubiorev.2018.10.024
- 21. Belenky G, Wesensten NJ, Thorne DR, et al. Patterns of performance degradation and restoration during sleep restriction and subsequent recovery: A sleep dose-response study. *Journal of Sleep Research*. 2003;12(1):1-12. doi:10.1046/j.1365-2869.2003.00337.x
- 22. Van Dongen HPA, Maislin G, Mullington JM, Dinges DF. The cumulative cost of additional wakefulness: Dose-response effects on neurobehavioral functions and sleep physiology from chronic sleep restriction and total sleep deprivation. *Sleep*. 2003;26(2):117-126. doi:10.1093/sleep/26.2.117
- 23. Basner M, Rao H, Goel N, Dinges DF. Sleep deprivation and neurobehavioral dynamics. *Current Opinion in Neurobiology*. 2013;23(5):854-863.
- Banks S, Van Dongen HPA, Maislin G, Dinges DF. Neurobehavioral dynamics following chronic sleep restriction: Dose-response effects of one night for recovery. *Sleep*. 2010;33(8):1013-1026. doi:10.1093/sleep/33.8.1013
- 25. Goel N, Van Dongen HPA, Dinges DF. Chapter 38 Circadian Rhythms in Sleepiness, Alertness, and Performance. In: Kryger MH, Roth T, Dement WC, eds. *Principles and Practice of Sleep Medicine (Fifth Edition)*. W.B. Saunders; 2011:445-455.
- Van Dongen HPA, Hursh SR. Chapter 67 Fatigue, Performance, Errors, and Accidents. In: Kryger MH, Roth T, Dement WC, eds. *Principles and Practice of Sleep Medicine (Fifth Edition)*. W.B. Saunders; 2011:753-759.





- 27. Lowe CJ, Safati A, Hall PA. The neurocognitive consequences of sleep restriction: A metaanalytic review. *Neuroscience & Biobehavioral Reviews*. 2017;80:586-604. doi:10.1016/j.neubiorev.2017.07.010
- 28. Lim J, Dinges DF. Sleep deprivation and vigilant attention. *Annals of the New York Academy of Sciences*. 2008;1129(1):305-322. doi:10.1196/annals.1417.002
- 29. Honn KA, Halverson T, Jackson ML, et al. New insights into the cognitive effects of sleep deprivation by decomposition of a cognitive throughput task. *Sleep*. 2020;43(7):zsz319. doi:10.1093/sleep/zsz319
- Arnal PJ, Sauvet F, Leger D, et al. Benefits of sleep extension on sustained attention and sleep pressure before and during total sleep deprivation and recovery. *Sleep*. 2015;38(12):1935-1943. doi:10.5665/sleep.5244
- Banks S, Jones CW, McCauley M, et al. Long-term influence of sleep/wake history on the dynamic neurobehavioural response to sustained sleep restriction. *Journal of Sleep Research*. 2023. *In Press*. doi: 10.1111/jsr.14117
- 32. Chai Y, Fang Z, Yang FN, et al. Two nights of recovery sleep restores hippocampal connectivity but not episodic memory after total sleep deprivation. *Scientific Reports*. 2020;10(1):1-11. doi: 10.1038/s41598-020-65086-x
- Rupp TL, Wesensten NJ, Bliese PD, Balkin TJ. Banking sleep: Realization of benefits during subsequent sleep restriction and recovery. *Sleep*. 2009;32(3):311-321. doi:10.1093/sleep/32.3.311
- 34. Van Dongen HPA, Price NJ, Mullington JM, Szuba MP, Kapoor SC, Dinges DF. Caffeine eliminates psychomotor vigilance deficits from sleep inertia. *Sleep*. 2001;24(7):813-819. doi:10.1093/sleep/24.7.813
- 35. McLellan TM, Caldwell JA, Lieberman HR. A review of caffeine's effects on cognitive, physical and occupational performance. *Neuroscience & Biobehavioral Reviews*. 2016;71:294-312. doi:10.1016/j.neubiorev.2016.09.001
- 36. Gurubhagavatula I, Barger LK, Barnes DM, et al. Guiding principles for determining work shift duration and addressing the effects of work shift duration on performance, safety, and health: Guidance from the American Academy of Sleep Medicine and the Sleep Research Society. *Sleep*. 2021;44(11): zsab161. doi:10.1093/sleep/zsab161

