In 2014, the Hypersomnia Foundation was incorporated as a 501(c)(3) nonprofit organization to improve the lives of people with hypersomnia. The Foundation advocates on people’s behalf, provides support, educates the public and healthcare professionals, raises awareness, and funds research into effective treatments, better diagnostic tools, and, ultimately, cures for the debilitating conditions that comprise central disorders of hypersomnolence—idiopathic hypersomnia, Kleine-Levin syndrome, and narcolepsy. The Foundation will fulfill this mission by

- Providing education for people with hypersomnia and their supporters, medical professionals, and scientists.
- Representing people with hypersomnia at medical meetings, pharmaceutical companies, sleep-related organizations, and extramural funding agencies.
- Establishing a patient registry.
- Funding research to identify the cause of and effective treatments for hypersomnia.

Won’t you help? Your donation to the Hypersomnia Foundation will help to achieve these goals and ensure a better life for people with hypersomnia. Please donate online at www.hypersomniafoundation.org.

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Some people with hypersomnia set several alarms, hoping to hear even one. Still others rely on someone to drag them out of bed. When finally “awake,” many stumble through the first minutes or hours of their day in a state of “sleep drunkenness” and rely on caffeine or stimulant medication to function when they are awake.

Hypersomnia Symptoms
- Sleep that is unrefreshing, even when the sleep period is long
- Sleep drunkenness (or confusional arousal) when trying to wake up
- Excessive daytime sleepiness
- Automatic behavior (talking or moving without awareness or recollection)
- Mental dullness or “brain fog”
- Trouble concentrating or cognitive dysfunction

Central Disorders of Hypersomnolence
- Idiopathic hypersomnia/hypersomnolence disorder
- Kleine-Levin syndrome
- Narcolepsy

Other Conditions in Which Hypersomnia Symptoms Are Thought To Occur
- Adrenal insufficiency
- Attention deficit disorder
- Carnitine deficiency
- Chronic fatigue syndrome/myalgic encephalomyelitis
- Ehlers-Danlos syndrome
- Iron deficiency
- Hypothyroidism
- Major depressive disorder
- Sleep apnea
- As a side effect of commonly prescribed or over-the-counter medication

Diagnosis
Overnight polysomnography, followed by a Multiple Sleep Latency Test (MSLT), is useful in diagnosing some potential causes of hypersomnolence, such as sleep apnea and narcolepsy. Actigraphy and sleep diaries may be helpful in documenting sleep over a longer period of time. Laboratory tests or brain imaging studies may be necessary and are determined on a case-by-case basis.

Treatment
The US Food and Drug Administration has not approved any treatments for idiopathic hypersomnia or Kleine-Levin syndrome. All medications used for these conditions are prescribed “off label.” Stimulants and wake-promoting agents are approved for the treatment of hypersomnolence associated with narcolepsy, and sodium oxybate is approved for the treatment of hypersomnolence and cataplexy associated with narcolepsy.