

What doctors want patients to know about taking naps

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Napping can be a simple and effective way to recharge—boosting mood, enhancing alertness and even supporting heart and brain health when done in moderation. For many, a brief midday rest is a healthy habit that complements a busy lifestyle. But frequent or prolonged daytime sleepiness may point to something more concerning.

Excessive napping can be associated with underlying medical conditions such as [sleep apnea](#), [depression](#) or cardiovascular issues. For patients, understanding when a nap is restorative—and when it might be a red flag—is key to promoting better sleep hygiene and uncovering potential health risks that warrant further evaluation.

The AMA's What Doctors Want Patients to Know™ series gives physicians a platform to share what they want patients to understand about today's health care headlines.

In this installment, James Rowley, MD, a sleep medicine physician at Chicago's Rush University System for Health and program director for the sleep medicine fellowship at Rush University Medical Center, took time to discuss what patients should know about taking naps.

[Rush University System for Health](#) is part of the [AMA Health System Member Program](#), which provides enterprise solutions to equip leadership, physicians and care teams with resources to help drive the future of medicine.

You may not be getting enough sleep

“Napping is actually indicative that you potentially are not getting enough sleep or not getting quality sleep,” said Dr. Rowley. “The need to nap in and of itself is not bad, but it can indicate that there could be something wrong.”



James Rowley, MD

“If you’re not getting enough sleep, then that 15-minute nap in the middle of the afternoon may not be a bad thing because it would give you a little energy and charge you up for the afternoon and get you through the rest of the day,” he said. “A long nap, though, can actually have side effects.”

“A nap is never bad, per se, but the fact that you need a nap indicates that there is something potentially not right with your sleep,” he said.

For older adults, naps are good

“There’s a lot of evidence that in adults 65 or older in particular,” said Dr. Rowley, “they don’t get all the sleep that they need at night because of aging effects.”

As a result, “taking a 15-to-20-minute nap during the day is probably just part of that 24-hour cycle of how much sleep you need as an older adult,” he said. “But there’s also data that indicates that older adults are less sleepy than young people, which probably reflects in part that older people are getting enough sleep—as opposed to young people, who don’t get enough sleep.”

This may “indicate that in the older populations, there are other medical disorders going on that may be disrupting your sleep and it shows that something’s not right and then therefore you’re at higher risk for things like disease mortality,” said Dr. Rowley.

Napping may help some sleep disorders

“There are a couple of sleep disorders—such as narcolepsy and idiopathic hypersomnia—where napping is both part of the disease and then potentially helps them get through their day better,” said Dr. Rowley.

“That’s particularly true in narcolepsy, not so much in idiopathic hypersomnia,” which is a neurological sleep disorder that is characterized by excessive daytime sleepiness despite adequate nighttime sleep.

“But in the general population, if you’re not getting enough sleep and you can’t figure out a way to get more sleep at night to prevent the need for napping, a short nap can be potentially beneficial,” he said. “A nap may help most other people, but it leads back to: what is going on that you need a nap in the first place?”

15 to 20 minutes is ideal for a nap

“Which most people would say is too short, but it turns out beyond that there’s a much bigger chance that you get into slow wave or deep sleep,” Dr. Rowley said. “And then, when you wake up out of that you have a lot of what we call sleep inertia, which is that feeling that you just can’t get yourself going.

“A lot of people experience it more in the mornings, especially if they get up too early and take a while to get going,” he added. “But when you have sleep inertia, you’re not functioning and with a 15-to-20-minute nap, you’re more likely to wake up ... more awake, alert and ready to go right away. So, a shorter nap is better than a longer nap.”

Power naps offer cognitive benefit

“A short power nap has more of an immediate cognitive benefit. You're going to be awake, you're going to be alert, ready to go,” Dr. Rowley said. “The longer nap, again, may be indicative of something else going on that you need to make up for that you're not getting a [good night's sleep](#).”

“So, a power nap may have some immediate benefits in terms of how you feel and everything, but it needs to be evaluated,” he added. “Long term, the better thing is to get a good night's sleep. That's what is going to be best for your brain health.”

Sleep proficiency declines with age

“As we age, we sleep less at night and what's called the sleep efficiency goes down—that's the amount of sleep for the amount of time that you're in bed,” Dr. Rowley said, noting that sleep proficiency is a broader term that often refers to the overall effectiveness of a person's sleep, including aspects such as sleep quality, duration and architecture, “and that goes down as we age.”

“Some people make up for it by taking a short nap after lunch and then their 24-hour sleep is about the same as it would have been at a younger age,” he said. “So, when an older person comes in and tells me they take a 15-to-20-minute cat nap, I don't usually worry about it. Now, if they're taking three or four of them, that's a different issue.”

“There's also evidence that as we get older, we should be less sleepy during the day,” Dr. Rowley said. “Part of that is young people are not getting enough sleep ... because most people through the college ages still need a good eight to nine hours of sleep at night and most of them aren't getting it.”

“They often look sleepy during the daytime, but if they got the amount of sleep they should be getting, they'd probably be wide awake,” he added.

As you age, sleep needs change

“The biggest changes are actually across infancy to childhood to adolescents to being a young adult,” Dr. Rowley said, noting “infants sleep 18 to 20 hours a day because their circadian rhythms are not in place yet, so that’s why they sleep on and off all day. At the end of that first year when they slowly start to consolidate most of the sleep at night and maybe one nap during the day, their circadian rhythms are in place.”

Meanwhile, “most school-aged children—elementary and middle school—should be getting nine or 10 hours a day to really feel rested, he added. “Teenagers still need eight to nine hours. They’re not getting it, but they need eight to nine hours and it’s usually just finally into adulthood where the American Academy of Sleep Medicine says seven is sufficient.”

Assess how long you’re sleeping

“The first thing you should do is just ask yourself: Am I getting seven hours of sleep per night?” Dr. Rowley said. “If you are not getting seven hours of sleep at night, the first thing you should do is to figure out a way to get seven hours of sleep at night.”

This is important “because for most adults, if you get seven hours of sleep at night, you should not need a nap during the day or maybe one once or twice a week at best,” he said. “And if you are getting seven hours of sleep and finding the need to take naps, then yes, you should talk to your primary care doctor first but then consider seeing a sleep physician to make sure there’s no sleep disorder.”

Medications can cause sleepiness

Sleep medicine physicians will “also go through your list of medications because a lot of common medications cause daytime sleepiness,” Dr. Rowley said. “There are things you can’t do, but at least you’ve identified why someone is sleepy and you can try to work with them.”

“There are a couple of medications that cause sleepiness and should be taken at nighttime, but they’re prescribed daily so people often take them during the day,” he said. “But most would be perfectly fine being taken at bedtime because they can then help you sleep a little bit.”

The most common over the counter medications associated with sleepiness are diphenhydramine—known by its brand name Benadryl—and doxylamine, which is an antihistamine medication used to treat insomnia and allergies.

Additionally, some medication classes that can cause sleepiness are antidepressants, antipsychotics, opioids and antianxiety agents in the benzodiazepine class.

Try to nap after lunch

If you do want to nap, the best time would be after lunch because “with our natural circadian rhythms, we are most sleepy around 3 p.m. That’s even for people who are getting more than adequate sleep,” Dr. Rowley said. “So, if you wanted to coincide when you’re most sleeping with a nap, somewhere in the 3 p.m. range would be good, but I wouldn’t do it much later than that unless you’re planning on staying up later.”

“When you think about it, a lot of cultures that have the tradition of a siesta in the afternoon take it at 3 or 3:30 p.m.,” he said. “Beyond 4 p.m. or 5 p.m. two things will happen. One, it gets harder to nap. That drive to be asleep, the drive to stay awake, dampens in the middle of the afternoon but then comes back, so most of us are alert in the evening hours.

“But then if you also take it too late, you won’t have enough time for that sleepiness drive to come back so that you’re ready to sleep at 10:30 p.m. or 11 p.m. which for most people is a good time to go to sleep,” Dr. Rowley added.

Be mindful if you work nights

“A lot of people who work nights don’t get sufficient sleep when they first get home and for some of them taking a nap before they go back to work can actually be quite helpful,” said Dr. Rowley, “because then they’re getting enough sleep for what they need.”

When it comes to “inconsistent sleep patterns, one would have to ask why they are having an inconsistent sleep pattern,” he said. “Is it work-related or is it something inherent? And then you have to work with them to see what you can do.

“But if it's not related to work, then again that's a reason to see a sleep doctor because most of us have pretty strong circadian rhythms and should be sleeping during the nighttime,” Dr. Rowley added.

Visit your doctor

For adults 18 to 64, “taking a daily nap, taking multiple naps during the day or taking one very long nap during the day, all would be indicators that you really need to go see a doctor about your sleep,” Dr. Rowley said. “Napping is not something that should be happening daily and if it is, then you really need to investigate why.”

“Are you getting enough sleep? And if the answer is yes to that, then you have to ask if you're getting enough quality sleep,” he said. Also look at if “there are medications or a medical disorder that's affecting how you're feeling during the day.”

After that, “you should seek out a consultation to see what's going on and then potential treatment,” Dr. Rowley said.