

SEPTEMBER 2026

Dana Weinstein, MA
Erica L. Rosenthal, PhD
Veronica Jauriqui, MA
Soraya Giaccardi Vargas, MS
& Adam Amel Rogers, MCM
USC Norman Lear Center

Julie Flygare, JD
Ello Oglesby, MPH

Project Sleep

Shelby Harris, PsyD, DBSM

Albert Einstein
College of Medicine

a representation
wake-up call



NARCOLEPSY
in Fictional Narrative
Entertainment



USCAnnenberg
Norman Lear Center

projectsleep

TABLE OF CONTENTS



- 03 Acknowledgements
- 04 Executive Summary
- 06 Introduction
- 11 Findings: How is Narcolepsy Portrayed in Entertainment?
- 29 Conclusion & Recommendations for Creatives

- 31 Appendix A: Round 1 Methodology (1983-2021)
- 34 Appendix B: Round 2 Methodology (2021-2025)



Recommended Citation:

Weinstein, D., Rosenthal, E. L., Jauriqui, V., Giaccardi Vargas, S., Rogers, A. A., Flygare, J., Oglesby, E., & Harris, S. (2026). *A representation wake-up call: Narcolepsy in fictional narrative entertainment*. USC Norman Lear Center. www.mediaimpactproject.org/narcolepsy.

ACKNOWLEDGEMENTS

This report is the product of a joint research project between Project Sleep and the USC Norman Lear Center.

Project Sleep conceived the study and conducted the initial (round 1) analysis of entertainment portrayals of narcolepsy, spanning 1983 to 2021.

- Julie Flygare led the round 1 analysis, summarized findings, and supported report writing.
- Ello Oglesby provided content coding and analysis, and contributed to the discussion and summary of findings.
- Dr. Shelby Harris is a Clinical Associate Professor at the Albert Einstein College of Medicine and a member of Project Sleep's Advisory Board. She provided content coding and contributed to the analysis and discussion of findings.

Project Sleep is additionally grateful to its community members for their ongoing contributions to the Sleep Disorders in Film & TV Database: project-sleep.com/contributors-narcolepsy-in-film-tv

The USC Norman Lear Center expanded the sample to include new titles through 2025 (round 2), formalized the coding procedures, and wrote and designed this report.

- Dana Weinstein served as the lead researcher on this joint project, overseeing round 2 content coding, merging the two datasets, analysis, and summarizing findings.
- Erica Rosenthal provided technical oversight and led report writing.
- Veronica Jauriqui served as project manager, designed the report, and contributed to content coding.
- Soraya Giaccardi Vargas and Adam Rogers provided additional coding support.



The Norman Lear Center is a nonpartisan research and public policy center that studies the social, political, economic, and cultural impact of entertainment. The Lear Center helps bridge the gap between the entertainment industry and academia, and between them and the public. Through its scholarship, research and partnerships; its events, publications and outreach to the creative community; and its role in formulating the field of entertainment studies, the Norman Lear Center works to be at the forefront of discussion and practice – and to illuminate and repair the world.



Project Sleep is a 501(c)(3) non-profit organization dedicated to raising awareness about sleep health, sleep equity, and sleep disorders. As a national leader in sleep advocacy and awareness, Project Sleep recognizes that the media is one of our greatest allies in the effort to educate people about sleep health and sleep disorders. For this reason, we strive to work with the media to tell stories that accurately reflect real-life experiences that will resonate with the public. Project Sleep can provide background information for stories and sources of people living with sleep disorders, researchers, and medical professionals.

EXECUTIVE SUMMARY



Narcolepsy is a chronic neurological condition that impairs the brain's ability to regulate the sleep-wake cycle. It affects an estimated 1 in 2,000 people, approximately 200,000 Americans and 3 million people worldwide. Symptoms include excessive daytime sleepiness, cataplexy (muscle weakness triggered by emotions), vivid hallucinations around sleep, sleep paralysis, and disrupted nighttime sleep. There is currently no cure for narcolepsy, only symptom management.

Due to poor understanding, the gap between symptom onset and diagnosis averages 8 to 15 years, and the majority of people with narcolepsy remain undiagnosed or misdiagnosed. People with narcolepsy are often stigmatized as lazy or careless, and may be hesitant to disclose their disorder to others.

Extensive research shows the power of media to shape public awareness and reduce stigma around medical conditions, but little research has examined media representations of narcolepsy. **Project Sleep**, a nonprofit organization dedicated to raising awareness about sleep disorders, set out to address this gap by:

- Launching a crowdsourced **Sleep Disorders in Film & TV Database** to track representations;
- Partnering with the USC Norman Lear Center's **Hollywood, Health & Society** program to engage the entertainment industry around accurate portrayals of narcolepsy and other sleep disorders; and
- Working with the Lear Center on a joint study to understand how narcolepsy is represented in fictional narrative entertainment.

What We Did

Together, Project Sleep and the Norman Lear Center analyzed a total of **56 titles** (15 films and 41 TV shows) with explicit mentions of either “narcolepsy” or “narcoleptic” that were released between 1983 and 2025:

- **34 included character portrayals:** at least one *visible* character with narcolepsy, even if not formally diagnosed (41 unique characters);
- **23 had linguistic mentions only:** either metaphorical, in reference to a hypothetical character, or in reference to an unseen character.

Key Findings



While fewer than half of the 56 titles were comedies, 80% used narcolepsy for comedic effect or as a punchline. Many of the comedic mentions employed the term “narcoleptic” figuratively or metaphorically to characterize people or situations as dull, sleepy, or incompetent.



Of the 34 titles with character portrayals, more than four in five (82%) included exaggerated “sleep attacks,” involving a dramatic collapse that does not reflect real-life narcolepsy symptoms. Common symptoms of narcolepsy, such as excessive daytime sleepiness, cataplexy, vivid hallucinations around sleep, and sleep paralysis, were rare in these portrayals.



Diagnostic procedures were rarely mentioned and only shown once. One in four titles mentioned treatment for narcolepsy. *The Simpsons*, which worked with Project Sleep on this storyline, portrayed diagnostic and treatment procedures with striking accuracy.



Of 41 individual characters with narcolepsy, two in three (68%) were portrayed as less effective or capable. *The Mysterious Benedict Society* was a notable exception.

Recommendations for Creatives

1. **Use person-first language.** Instead of having a character referred to as “a narcoleptic,” or using the term “narcoleptic” figuratively to connote dullness, talk about “a person living with narcolepsy.”
2. **Avoid exaggerated and cartoonish sleep attacks,** which do not reflect real-life presentation of narcolepsy. Portray the actual symptoms of narcolepsy, such as excessive daytime sleepiness, cataplexy, vivid hallucinations around sleep, and sleep paralysis.
3. **Don’t turn narcolepsy into a punchline.** Narcolepsy is not a joke, but a neurological disorder that affects hundreds of thousands of Americans and millions worldwide.
4. **Skip the “lazy” and “inept” caricatures.** People with narcolepsy hold many roles and identities as parents, partners, friends, colleagues, students, caregivers, etc. Create multidimensional characters whose goals and motivations extend beyond their diagnosis.
5. **Explore stigma and disclosure.** Given high levels of stigma, a character may choose to hide their symptoms or diagnosis from others. This offers opportunities for dramatic tension and character development navigating relationships, trust, and a shifting sense of identity. Consider exploring barriers to care, health inequities, and the experiences of marginalized communities.
6. **Address the diagnosis and treatment of narcolepsy.** Interactions with medical professionals, diagnostic procedures, and treatments are key signals that could help viewers understand narcolepsy is a real medical condition. **Hollywood, Health & Society** provides free access to experts and other resources to help creatives depict narcolepsy and other sleep disorders with accuracy and sensitivity. Contact them at hhs@usc.edu.

Introduction

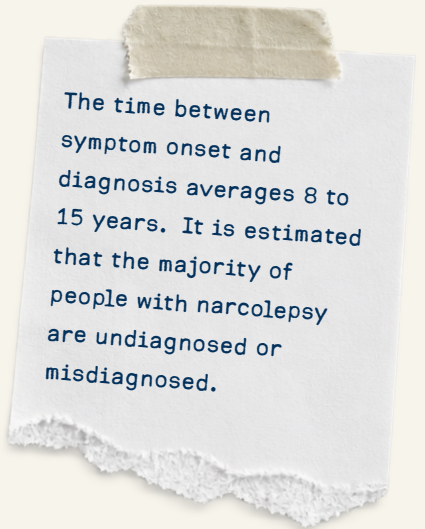
What is Narcolepsy?

Narcolepsy is a chronic neurological condition that impairs the brain's ability to regulate the sleep-wake cycle. It affects 1 in 2,000 people, approximately 200,000 Americans and 3 million people worldwide.¹

Symptoms include excessive daytime sleepiness, cataplexy (a unique form of muscle weakness, usually triggered by emotions), vivid hallucinations around sleep, sleep paralysis, and disrupted nighttime sleep. There are two forms of narcolepsy: type 1 (with cataplexy) and type 2 (without cataplexy).

Research suggests that type 1 narcolepsy is caused by a lack of orexin (sometimes called hypocretin), a key neurotransmitter that helps sustain alertness and regulate the sleep-wake cycle. Less is known about the causes of type 2 narcolepsy.

In the United States, diagnosis of narcolepsy typically relies on a 24-hour sleep study that includes a nighttime portion (polysomnogram) and daytime nap portion (multiple sleep latency test). A narcolepsy diagnosis is mainly based on how quickly and frequently one's brain enters rapid eye movement (REM)/dream sleep during these tests. However, because of lack of understanding (even among physicians), the time between symptom onset and diagnosis averages 8 to 15 years.² It is estimated that the majority of people with narcolepsy are undiagnosed or misdiagnosed; common misdiagnoses include epilepsy, depression, and schizophrenia.



The time between symptom onset and diagnosis averages 8 to 15 years. It is estimated that the majority of people with narcolepsy are undiagnosed or misdiagnosed.

There is currently no cure for narcolepsy. Treatment focuses on symptom management and often takes a long time to find the right combination. Treatments may include orexin agonists, nighttime oxybates, or histamine-directed medications to decrease excessive daytime sleepiness and cataplexy; wake-promoting or stimulant

1 Scammell, T. E. (2015). Narcolepsy. *The New England Journal of Medicine*, 373(27), 2654–2662. <https://doi.org/10.1056/NEJMra1500587>; Narcolepsy Network. (n.d.). *Narcolepsy fast facts*. <https://narcolepsynetwork.org/about-narcolepsy/narcolepsy-fast-facts/>; Project Sleep. (n.d.). *Narcolepsy [Fact sheet]*. <https://project-sleep.com/wp-content/uploads/2023/12/Narcolepsy-Fact-Sheet.pdf>

2 Thorpy, M. J., & Krieger, A. C. (2014). Delayed diagnosis of narcolepsy: Characterization and impact. *Sleep Medicine*, 15(5), 502–507. <https://doi.org/10.1016/j.sleep.2014.01.015>

medications to increase alertness; and/or antidepressants to decrease cataplexy, and scheduled daytime naps.³

Non-pharmacological coping strategies include social support such as meet-up groups or social media along with maintaining general health and wellness through sleep hygiene, nutrition, and exercise.⁴

Stigmatization of People with Narcolepsy

People with narcolepsy⁵ often face stigma and are labeled by loved ones, teachers, co-workers, and supervisors as antisocial, lazy, careless, or faking.⁶ Indeed, people with narcolepsy report feeling socially isolated (even within their own families), inferior to others, and hesitant to disclose their disorder to others, fearing the consequences and reaction they would receive.⁷

One study found that young adults with narcolepsy reported feeling significantly more health-related stigma than those without narcolepsy in all domains, including social rejection, financial insecurity, internalized shame, and social isolation. Further, the levels of health-related stigma seen in the young adults with narcolepsy were comparable to the stigma levels observed in people living with HIV.⁸

Narcolepsy in Media

There is extensive research documenting the power of media — and particularly popular entertainment — to shape public awareness and reduce stigma on a wide range of topics, including medical conditions.⁹ Given poor public understanding of narcolepsy and its social impacts and diagnosis gap, representing the condition accurately in media is essential.

-
- 3 Maski, K., Trotti, L. M., Kotagal, S., Auger, R. R., Rowley, J. A., Hashmi, S. D., & Watson, N. F. (2021). Treatment of central disorders of hypersomnolence: An American Academy of Sleep Medicine clinical practice guideline. *Journal of Clinical Sleep Medicine*, 17(9), 1881–1893. <https://doi.org/10.5664/jcsm.9328>
 - 4 Flygare, J., Oglesby, L., Parthasarathy, S., Thorpy, M. J., Mignot, E., Leary, E. B., & Morse, A. M. (2025). Social support and isolation in narcolepsy and idiopathic hypersomnia: An international survey. *Sleep Medicine*, 125, 65–73. <https://doi.org/10.1016/j.sleep.2024.11.013>
 - 5 Throughout this report, we advocate for the use of person-centered language (e.g., “a person with narcolepsy”), though many of the specific examples use the disease-centered term “narcoleptic.” For more on person-centered language, see Fuoco, R. E. (2017). People-centered language recommendations for sleep research. *Sleep*, 40(4), zsx039. <https://doi.org/10.1093/sleep/zsx039>
 - 6 U.S. Food and Drug Administration. (2014). *The voice of the patient: A series of reports from the U.S. Food and Drug Administration’s (FDA’s) Patient-Focused Drug Development Initiative*. <https://www.fda.gov/media/88736/download>
 - 7 Broughton, W. A., & Broughton, R. J. (1994). Psychosocial impact of narcolepsy. *Sleep*, 17(8 Suppl.), S45-S49. https://doi.org/10.1093/sleep/17.suppl_8.s45; Kapella, M. C., Berger, B. E., Vern, B. A., Vispute, S., Prasad, B., & Carley, D. W. (2015). Health-related stigma as a determinant of functioning in young adults with narcolepsy. *PLoS ONE*, 10(4), e0122478. <https://doi.org/10.1371/journal.pone.0122478>
 - 8 Kapella, M. C., Berger, B. E., Vern, B. A., Vispute, S., Prasad, B., & Carley, D. W. (2015). Health-related stigma as a determinant of functioning in young adults with narcolepsy. *PLoS ONE*, 10(4), e0122478. <https://doi.org/10.1371/journal.pone.0122478>
 - 9 Korobkova, K., Weinstein, D., Felt, L., Rosenthal, E. L., & Blakley, J. (2023). *Lights, camera, impact: 20 years of research on the power of entertainment to support narrative change*. USC Norman Lear Center Media Impact Project. <https://learcenter.s3.us-west-1.amazonaws.com/NormanLearCenter-Narrative-Change-Research-Review.pdf>

Little research, however, has examined media coverage of narcolepsy. An Italian study of 40 years of coverage in the newspaper *La Stampa* found more than 10% of articles used a sensationalistic title and 20% included stigmatizing content. Five percent described patients with narcolepsy as dangerous, and only one in four mentioned services for diagnosis and treatment.¹⁰ To the authors' knowledge, however, no research has yet examined how narcolepsy is portrayed in popular entertainment.

Project Sleep, a non-profit organization dedicated to raising awareness about sleep health, sleep equity, and sleep disorders, has frequently heard from people with narcolepsy who attribute their delayed diagnoses in part to their symptoms not matching how the condition is portrayed on screen:



“I had heard of narcolepsy, but only from what I’d seen on TV and in film, which is usually comical and overexaggerated and very binary, very black and white. And, you know, that’s not what I have. I’m not falling asleep mid-conversation with people.”

— **Maha Awad**

TV host, voice actor, producer, and Rising Voices speaker living with narcolepsy¹¹



“When I think of narcolepsy, I think of Deuce Bigelow: Male Gigolo, the girl is at the table just falling asleep and I’m like alright I don’t have that.”

— **Josh Andrews**

Former NFL player living with narcolepsy¹²

To begin to address these gaps, Project Sleep launched a Sleep Disorders in Film & TV Database¹³ to track portrayals of sleep conditions for future research. In 2024, they began working with the **USC Norman Lear Center’s Hollywood, Health & Society** program to engage the entertainment industry and promote more accurate, authentic, and nuanced portrayals of individuals with sleep disorders. This partnership produced

10 Varallo, G., Pingani, L., Musetti, A., Galeazzi, G. M., Pizza, F., Castelnuovo, G., Plazzi, G., & Franceschini, C. (2022). Portrayals of narcolepsy from 1980 to 2020: A descriptive analysis of stigmatizing content in newspaper articles. *Journal of Clinical Sleep Medicine*, 18(7), 1769-1778. <https://doi.org/10.5664/jcsm.9966>

11 Project Sleep. (2025, October 8). Maha Awad’s narcolepsy story sharing event [Video]. YouTube. <https://www.youtube.com/live/bdHkZNpJzwA>

12 Project Sleep. (2021, September 17). NFL player Josh Andrews speaks out about living with narcolepsy [Video]. YouTube. <https://www.youtube.com/watch?v=mlsSgPgDDOY>

13 Project Sleep. (n.d.). Sleep disorders in film & TV database [Google Form]. Google Forms. https://docs.google.com/forms/d/e/1FAIpQLSelAudnsS88-2QjMrEuJE05bX6vw67FYhjCEdO_-Bnc7orudw/viewform

three tip sheets designed for entertainment industry creatives, one addressing narcolepsy,¹⁴ and briefings with several top TV shows and studios.

The two organizations also hosted a panel discussion at the Writers Guild of America West in conjunction with World Sleep Day in 2025: “Sleepless in Hollywood? Anxiety, Insomnia & the Truth About Sleep Disorders.”¹⁵ Panelists included sleep specialists, people living with narcolepsy, and writers who have portrayed sleep disorders positively.

Study Overview

To better understand how narcolepsy is represented in scripted entertainment, Project Sleep conducted an analysis of 33 titles spanning 1983 through 2021.¹⁶ In 2026, they engaged the USC Norman Lear Center’s research team to update the sample to include representations through 2025, formalize the analysis procedure, and synthesize findings across the two samples.



(TOP) Speakers Lauren Thomas (person with narcolepsy), Dr. Christopher Allen and Dr. Michael Grandner during discussion held at the WGAW on sleep disorders and Hollywood’s role in raising awareness.

(ABOVE) Moderator Lindsay Scola (person with narcolepsy) and panelist Brent Miller, executive producer of the streaming series *Clean Slate* (Prime).

Photos by Michael L. Jones

14 Hollywood, Health & Society. (2025). *Sleep disorders: Narcolepsy*. <https://hollywoodhealthandsociety.org/tip-sheets/sleep-disorders-narcolepsy/>

15 Project Sleep. (2025, April 1). *Sleepless in Hollywood? Event at Writers Guild of America West* [Video]. YouTube. <https://www.youtube.com/watch?v=3SKFWWjNbIo>

16 A title refers to a film or TV series; some titles include multiple episodes.

The combined sample includes **56 TITLES** (15 films and 41 TV series) in which “narcolepsy” or “narcoleptic” was explicitly mentioned, and **41 INDIVIDUAL CHARACTERS** with narcolepsy. Of the 56 titles:

- **34 INCLUDED CHARACTER PORTRAYALS:** it is explicitly stated that at least one *visible* character has narcolepsy, even if not formally diagnosed.
- **23 HAD LINGUISTIC MENTIONS ONLY:** a viewer would not conclude the mention refers to an actual visible character, such as:
 - metaphorical or figurative mentions
 - references to a hypothetical character
 - references to an unseen character.

Table 1.
Full Sample Breakdown

SAMPLE	YEAR RANGE	TITLES		REPRESENTATION	
ROUND 1: 33 Titles ¹⁷ (Project Sleep Sample)	1983-2021	 25 TV series	 8 films	24 titles with character portrayals 31 unique characters	9 titles with linguistic mentions
ROUND 2: 23 Titles ¹⁸ (Norman Lear Center Sample)	2021-2025	 16 TV series	 7 films	10 titles with character portrayals 10 unique characters	14 titles with linguistic mentions
COMBINED: 56 Titles	1983-2025	 41 TV series	 15 films	34 titles with character portrayals 41 unique characters	23 titles with linguistic mentions

17 The Round 1 sample includes two titles from 2021, *Doctor Who* and *The Mysterious Benedict Society*, but is otherwise limited to titles released from 1983 through 2020.

18 One title in the Round 2 (Norman Lear Center) sample, *Chicago Med*, has both a character portrayal and a linguistic mention in two separate episodes/storylines. These are counted separately; as a result, the number of portrayals (34) plus mentions (23) exceeds the total number of titles (56).

FINDINGS:

How is Narcolepsy Represented in Entertainment?

Comedic Effect

While fewer than half of the 56 titles were comedies, 80% used narcolepsy for comedic effect or as a punchline.

- Comedy was the most common genre that included a character portrayal or linguistic mention of narcolepsy (48.2%), followed by drama (17.5%) and crime (17.9%), family (12.5%) and sci-fi (3.6%).
- Most comedic mentions and depictions occurred in comedies, but narcolepsy was often also used for comedic effect in dramas, family programming, and crime/thrillers.
- Both linguistic mentions (83%) and character portrayals (76%) overwhelmingly used narcolepsy as a joke, insult, or put-down.
- Of the comedic mentions, many used the term “narcoleptic” figuratively or metaphorically to characterize people or situations as dull, sleepy, or incompetent.

Figure 1.
Genre Breakdown

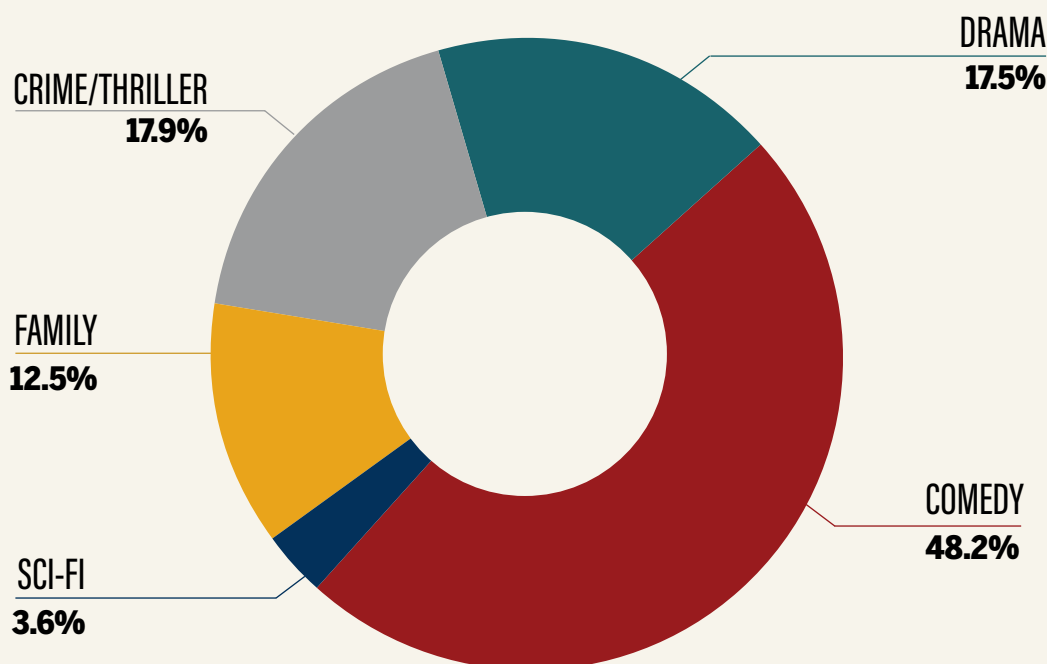


Figure 2.
Use of Narcolepsy for Comedic Effect

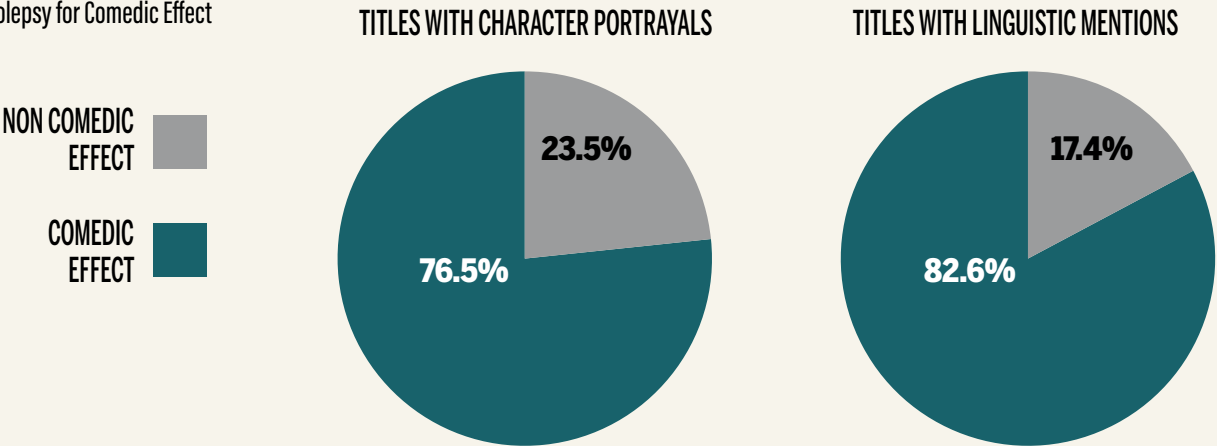


Table 2.
Examples of Linguistic Comedic Mentions

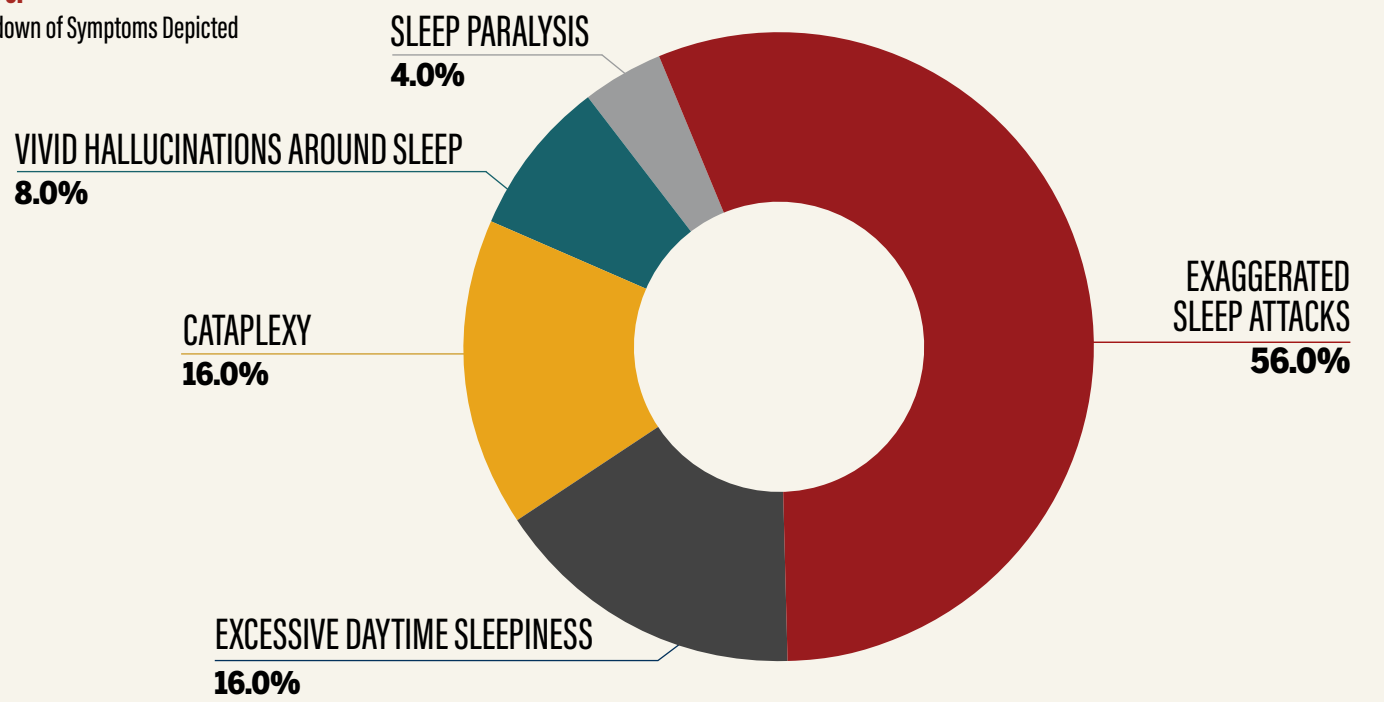
NOT YOUR ROMEO & JULIET	Two characters joke about a college professor’s boring lectures. After one character states that the professor in question is “narcoleptic,” the other character jokingly responds, “Well, we get to sleep through his talks. It’s only fair that he gets to, as well.”	
ONCE UPON A TIME IN WONDERLAND	The Knave of Hearts says in reference to the Dormouse, “So we came all the way here on the word of a narcoleptic rodent?”	 ONCE UPON A TIME IN WONDERLAND
LUCIFER	This series includes two completely unrelated joking mentions in which “narcoleptic” is used as an insult: “My brother drives like a narcoleptic old lady” and “We could get you a narcoleptic lawyer and a merciless judge.”	 LUCIFER

Symptoms of Narcolepsy

There were 50 depictions of narcolepsy symptoms across 41 characters. More than half were “exaggerated sleep attacks,” which do not reflect how the symptoms of narcolepsy present in real life.

- In comparison, more common symptoms of narcolepsy — excessive daytime sleepiness, cataplexy, hallucinations, and sleep paralysis — were portrayed relatively rarely.

Figure 3.
Breakdown of Symptoms Depicted



EXAGGERATED SLEEP ATTACKS

Exaggerated sleep attacks accounted for 28 out of 50 symptom depictions (56%).

- For the purpose of this research, we included an “exaggerated sleep attack” category to account for what we saw in many portrayals. We defined exaggerated sleep attacks as abruptly falling asleep while speaking or standing, without any apparent sleepiness in advance. Many involved a strange and dangerous collapse or falling backward with plank-like stiffness in a way that would result in a serious injury like a concussion in real life.
- Of the 34 titles with character portrayals, 82% included “exaggerated sleep attacks,” and 62% showed *only* sleep attacks with no other visible symptoms.¹⁹

19 While comparisons are not entirely appropriate because the time periods overlap, it is worth noting that the percentage of titles with only sleep attacks decreased from 70% in Round 1 (1983-2021) to 40% in Round 2 (2021-2025).

- While we did not formally code for snoring, it was very common in portrayals of exaggerated sleep attacks. Snoring is not a symptom of narcolepsy, but could be a sign of a different sleep disorder, sleep apnea.

Table 3.
Examples of Exaggerated Sleep Attacks

MY OWN PRIVATE IDAHO	The main character Mike Waters begins to convulse and go limp, falling out of frame to the ground, followed by the sound of snoring. His sleep attacks sometimes last so long that he would wake up the next day and not know where he was.	
DEUCE BIGALOW: MALE GIGOLO	The character Carol answers the door and begins to introduce herself to Deuce, saying, "Hi, I'm Caro..." before suddenly falling backward like a stiff plank, out of frame. A loud thud is heard, followed by snoring. Falling like this in real life would likely result in a concussion.	 DEUCE BIGALOW: MALE GIGOLO
MOULIN ROUGE!	The "Narcoleptic Argentinean" falls through a floor and remains asleep despite the dangerous fall, wakes up briefly and falls back asleep. Another character, Toulouse describes, "Perfectly fine one moment, then suddenly—unconscious the next."	 RAT RACE
RAT RACE	A character, Enrico, is running through a busy lobby when he abruptly stops, closes his eyes, and starts snoring, remaining fully upright. A real person would be biologically unable to remain standing upright asleep for more than a brief moment before losing postural control.	
STUMBLE	The character Madonna falls backward in a rigid, plank-like position, with an off-screen thud before cutting to see her asleep on the floor.	
THE BOYS	In the middle of a life-or-death fight scene, Black Noir II topples forward snoring and is unable to continue fighting. The sudden, unrealistic nature of his mid-fight sleep and dramatic fall represents a clear example of an exaggerated sleep attack.	 THE BOYS

EXCESSIVE DAYTIME SLEEPINESS

Excessive daytime sleepiness accounted for 8 out of 50 symptom depictions (16%).

- Excessive daytime sleepiness is a hallmark symptom of narcolepsy, involving periods of extreme sleepiness during the day that feel comparable to how someone without narcolepsy would feel after staying awake for 48-72 hours.²⁰ The sleepiness can be severe, making it difficult to focus and stay alert, especially during periods of inactivity or sedentary or monotonous activities, like listening to a lecture, watching a movie, or riding on a train. This may or may not lead a person to fall asleep.

Table 4:
Examples of Excessive Daytime Sleepiness

Excessive Daytime Sleepiness: Periods of extreme sleepiness during the day that feel comparable to how someone without narcolepsy would feel after staying awake for 48-72 hours. Especially likely during inactivity or monotonous activities.

LEOPARD SKIN	In a scene detailing her backstory, Batty is shown lying in bed in the morning, as she nar- rates her own experience with narcolepsy and excessive daytime sleepiness: “I developed narcolepsy [. . .] It happens to one in 2,000 people. No matter how much sleep I got, I had an irresistible urge to sleep.”
SHUFFLE	The main character, Lovell, is shown falling asleep on boring dates and while reading, watching TV, and driving. These are plausible sedentary situ- ations where sleepiness could onset and lead to sleep.



SHUFFLE

CATAPLEXY

Cataplexy likewise accounted for 8 of 50 symptom depictions (16%).

- Cataplexy is a unique form of muscle weakness, usually triggered by emotions such as laughter, exhilaration, surprise, or anger. The severity may vary from a slackening of the jaw or buckling of the knees to falling down.

20 Unlike “exaggerated sleep attacks,” real sleepiness associated with narcolepsy typically begins with a sensation of sleepiness that can intensify over several seconds to minutes and may sometimes lead to falling asleep. Because people can feel sleepiness coming on, they may take reasonable actions before falling asleep, such as sitting or lying down or resting their head. When circumstances allow, a person experiencing excessive daytime sleepiness may seek a safe, quiet place to sleep out of public view. Napping on a toilet seat, in a car, on a couch, in a closet, or under a desk can therefore represent realistic locations for sleep.

- The weakness may be for a few seconds to several minutes and importantly, the person remains fully conscious (even if unable to speak) during the episode.²¹

Table 5:
Exampes of Cataplexy

Cataplexy: Muscle weakness, usually triggered by emotions such as laughter, exhilaration, surprise, or anger. Person remains conscious and aware of surroundings.

HILL STREET BLUES	One of the most accurate depictions of cataplexy comes from the earliest title in our analysis. A stand-up comedian tells a joke on stage as he starts to fumble the microphone and his eyelids begin to flutter. He tries to keep going, but drops the mic. The weakness in his arms, neck, and eyes are realistic to how partial cataplexy episodes manifest. Further, telling jokes is a prominent trigger for cataplexy. ²²	 HILL STREET BLUES
ST. DENIS MEDICAL	A patient, Kyle, collapses at a frisbee game and is later diagnosed with cataplexy that is triggered by his romantic feelings for his roommate, Jeff.	

OTHER SYMPTOMS

Two additional key symptoms of narcolepsy, which often co-occur in reality, were rarely portrayed.²³ Vivid hallucinations around sleep accounted for 4 out of 50 (8%) symptoms shown on screen, and sleep paralysis was only 2 out of 50 (4%).

- People with narcolepsy experience vivid hallucinations around sleep (technically called hypnagogic and hypnopompic hallucinations). These visual, auditory, or tactile hallucinations upon falling asleep or waking up can be frightening and confused with reality.

21 While cataplexy can begin abruptly and lead to falling down, the individual remains conscious and aware of their surroundings, hearing and feeling what is happening to their body even if they are unable to move for several seconds or minutes. This differs from “exaggerated sleep attacks,” in which surrounding dialogue implies that the person has fallen asleep and is unaware of what happened during the episode.

22 Overeem, S., van Nues, S. J., van der Zande, W. L., Donjacour, C. E., van Mierlo, P., & Lammers, G. J. (2011). The clinical features of cataplexy: A questionnaire study in narcolepsy patients with and without hypocretin-1 deficiency. *Sleep Medicine*, 12(1), 12-18. <https://doi.org/10.1016/j.sleep.2010.05.010>

23 People without narcolepsy can also experience sleep paralysis and hypnagogic and hypnopompic hallucinations, usually during periods of high stress or sleep deprivation. People with narcolepsy experience these symptoms with greater frequency and consistency over time.

- Sleep paralysis is the inability to move for a few seconds or minutes upon falling asleep or waking up. It is often accompanied by vivid hallucinations.

Vivid hallucinations around sleep accounted for 4 out of 50 (8%) symptoms shown on screen, and sleep paralysis was only 2 out of 50 (4%).

Table 6:
Examples of Hallucinations Around Sleep and Sleep Paralysis

Hypnagogic and hypnopompic hallucinations: Visual, auditory, or tactile hallucinations upon falling asleep or waking up. **Sleep paralysis:** Inability to move for a few seconds or minutes upon falling asleep or waking up.

WAKE	Sarita has frequent hallucinations that present as a key symptom of her narcolepsy, but the line between hallucinations and witnessing real-life crimes isn't always clear. During a clinical intake, Sarita confirms that she experiences sleep paralysis every night and just had a hallucination before the doctor came in.	 WAKE
PERCEPTIONS	A man who doesn't yet know he has narcolepsy speaks to a detective about his terrifying experience being attacked by aliens. He describes, "I was tired so I went to bed early, but I wish I never shut my eyes. There were three of them, they didn't talk but I could hear their thoughts. They had me in their paralysis beam." He both saw the aliens (vivid hallucination) and felt unable to move (sleep paralysis).	

Diagnosis and Treatment

While healthcare providers were occasionally referenced or shown on screen, diagnostic procedures were rarely shown. Likewise, only a quarter of portrayals mentioned treatment for narcolepsy.

- Of the 34 character portrayals, 13 (38%) included either an interaction or mention of a doctor or healthcare provider, which varied greatly. Some interactions were empathetic and helpful, others were antagonistic and unsupportive.
- Diagnostic procedures were rarely mentioned, and were only shown on screen in *The Simpsons*.
- Managing treatment options is a major part of living with narcolepsy, but only 24% of character portrayals mentioned treatments for narcolepsy, including amphetamines, anti-cataplectics, GHB, Provigil, Ritalin, and Xyrem.

Table 7:
Examples of Healthcare Interactions, Diagnosis, and Treatment

SCRUBS	Main character Dr. J.D. Dorian asks his medical colleagues, “<i>You guys want to go laugh at the narcoleptic guy?</i>” A man is shown in a hospital setting with electrodes on his face. His symptoms appear to be triggered by sexual arousal, so the medical personnel unethically attempt to arouse him in order to induce sleep. In reality, sexual arousal is a possible trigger for cataplexy, not sleep.
ST. DENIS MEDICAL	A medical professional suggests Kyle has narcolepsy, “<i>Well, it looks to me like cataplexy, which is a type of narcolepsy. Basically, it’s when someone experiences an intense emotion, your muscles shut down, and you could collapse.</i>” Kyle responds, “<i>Oh, good, so as long as I never feel an emotion again, I’ll be fine.</i>” The staff member says, “<i>Well, not every emotion. Everybody has their trigger. Anyway, we’re referring you to a specialist, and they’ll help you figure it out.</i>” The dialogue incorrectly identifies cataplexy as a type of narcolepsy, rather than a symptom, but accurately refers him to a specialist for evaluation.
THE SIMPSONS	The only title to visually portray a character receiving a formal narcolepsy diagnosis, Homer undergoes a spinal tap and is diagnosed with narcolepsy based on low levels of hypocretin (another name for orexin). In the US, diagnosis mainly relies upon a 24-hour sleep study, but a lumbar puncture is used in some clinical and research settings. The treatments prescribed to Homer, including amphetamines, antiepileptics, and GHB, are accurate.  THE SIMPSONS
WAKE	Sarita is shown visiting a sleep clinic. After describing her worsening symptoms, which include cataplexy, sleep paralysis, and hallucinations, the doctor asks how Sarita would feel about switching up her narcolepsy medications again.
ODE TO JOY	Main character Charlie is struggling due to his cataplexy. A real treatment, Xyrem, is mentioned (the commercial name for sodium oxybate, which is a first-line treatment option). Charlie rejects this quickly, suggesting he’d tried it and had intolerable side effects. Instead we see him utilize extreme and unconventional techniques, such as putting thumb tacks in his shoes, to mitigate symptoms.
SHUFFLE	While we don’t see any interactions with healthcare providers, toward the end of film, we see a bottle of Provigil (a wake-promoting treatment for narcolepsy) sitting on Orson’s desk, written “for a sleep disorder.” Despite his fears of being discriminated against as a doctor, he eventually starts medication.

Stress Triggers and Cures

Several portrayals incorrectly suggest that narcolepsy is a temporary condition, triggered by stress, or that it is curable.

- 21% (7 of 34) of portrayals talk about stress as a trigger for either the condition or symptom's onset.

Table 8:
Examples of Stress as a Trigger

MY OWN PRIVATE IDAHO	A character explains, “Narcolepsy, doctors are saying, is brought on by certain chemicals in the brain. Comes about in situations of stress.”	
FRASIER	Main character Niles Crane says he’s suffering from a “bout of narcolepsy.” He describes, “I checked with my doctor. I’m fine. It’s a reaction to stress. It’s my way of escaping the frustration of the whole ugly mess,” in reference to his divorce.	
MODERN FAMILY	Narcolepsy is described as “a neurological condition where people under extreme stress actually fall asleep—it’s like a way for the brain to escape.”	FRASIER
CSI	A suspect in a murder investigation describes, “I’m a narcoleptic, it’s a very serious disease... When I’m under stress, it gets worse.”	

Table 9:
Examples of Cures

LEOPARD SKIN	Batty claims she was “cured of my narcolepsy” due to her lover giving her very strict routines and essentially controlling her life.
HILL STREET BLUES	Vic character mentions a cure for his narcolepsy, describing, “I thought I had it licked. Four years in St. Louis, they had this clinic and they were giving me treatments, they said I was cured. 40% chance.”
MODERN FAMILY	Phil develops sleep episodes while hiding something from his wife, implying that the condition can be “cured” simply by telling the truth.
ST. DENIS MEDICAL	Kyle resolves to address the underlying emotional trigger for his cataplexy by deciding to tell his roommate Jeff how he feels, saying that “the only way out is through.”



MODERN FAMILY

Characters with Narcolepsy

In the 34 titles that included portrayals, there were a total of 41 characters depicted with narcolepsy. The majority of characters with narcolepsy were portrayed as white males over age 30.

- Narcolepsy can affect people across the lifespan, across racial and ethnic groups, and affects women and men at similar rates. In reality, narcolepsy often begins during adolescence or young adulthood, though diagnosis can occur at any age.²⁴
- 80.5% of characters were male, 87.8% were white, and 78% were over the age of 30.

Figure 4.
Character Demographics

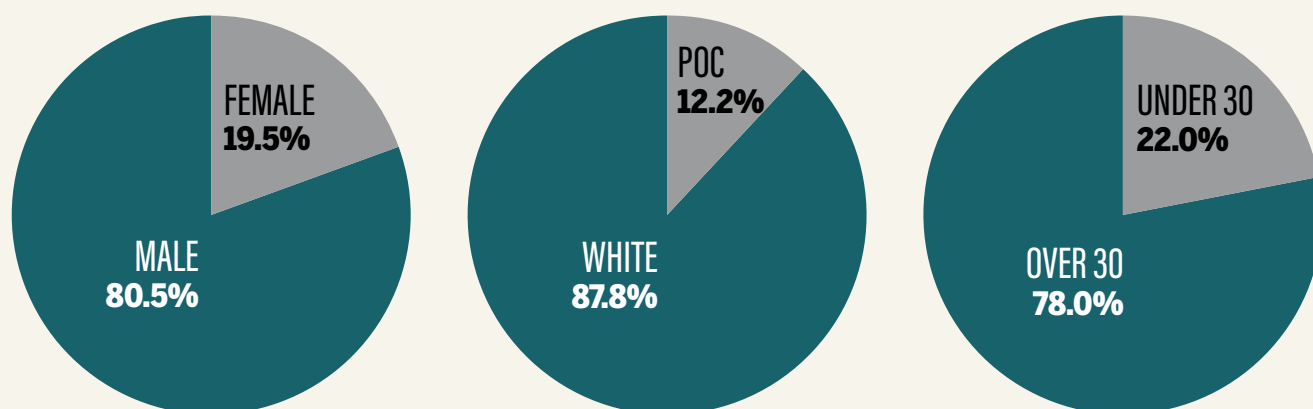
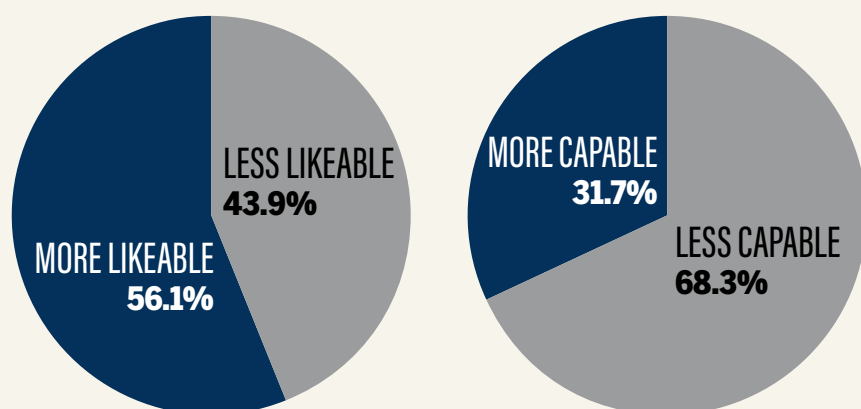


Figure 5.
Likeability and Competence



Just over half of characters with narcolepsy (56.1%) were portrayed as relatively likeable, but two in three (68.3%) were portrayed as less effective or capable.

24 Longstreth, W. T., Jr., Koepsell, T. D., Ton, T. G., Hendrickson, A. F., & van Belle, G. (2007). The epidemiology of narcolepsy. *Sleep*, 30(1), 13–26. <https://doi.org/10.1093/sleep/30.1.13>; Ohayon, M. M., Priest, R. G., Zulley, J., Smirne, S., & Paiva, T. (2002). Prevalence of narcolepsy symptomatology and diagnosis in the European general population. *Neurology*, 58(12), 1826–1833. <https://doi.org/10.1212/WNL.58.12.1826>; Scammell, T. E. (2015). Narcolepsy. *The New England Journal of Medicine*, 373(27), 2654–2662. <https://doi.org/10.1056/NEJMr1500587>

Table 10.
Examples of (Un)Likability and (In)Competence

MY OWN PRIVATE IDAHO	Main character Mike Waters is portrayed as a vulnerable, compassionate, and likable character. Despite the challenges he faces, including living with narcolepsy, his kindness, emotional openness, and desire for connection remain central to his characterization.	
THE RECRUIT	Janus is depicted as relatively rude and unhelpful towards the main character.	
OBITUARY	A minor character states that he has Tourette's and narcolepsy, which impacts his job as a window cleaner. A client finds a streak on her windows and claims it's due to him being "asleep on the job."	
MOULIN ROUGE!	The "Narcoleptic Argentinian" is portrayed as an eccentric and passionate artist with a big personality. However he comes off as ineffective and incapable in several scenes due to his narcolepsy getting in the way of his artistry.	
SNOW WHITE	The dwarf Sleepy is shown as having sleep attacks that interfere with his job as a miner and domestic worker.	
THE BOYS	Black Noir II is depicted as relatively unintelligent and goofy, as he struggles to navigate how to "play" the role of Black Noir. ²⁵ He is depicted as falling asleep mid-fight, which negatively affects his ability to perform his job as an assassin.	
THE MYSTERIOUS BENEDICT SOCIETY	A notable exception, the show features two main characters (twin brothers) with narcolepsy. While Mr. Benedict is the hero and Mr. Curtain is the villain, both are depicted as highly intelligent and capable.	

25 In the fictional universe of *The Boys*, Black Noir II is an actor hired to replace the original Black Noir after the latter was murdered and his death was covered up.

Thematic Findings

STIGMA AND SHAME

Several titles portrayed characters mocking the condition, responding to a disclosure with anger or annoyance, or otherwise framed narcolepsy as a source of stigma or shame.

- In *The Recruit*, CIA employee Janus falls asleep during a staff meeting. His boss awakens him by throwing a pen at his head and says, “*Hey. Knock it off. Nobody’s buying the narcolepsy crap. I don’t care what your doctor’s note says.*”
- In *The Boys*, Black Noir II is caught sleeping during a meeting and another character kicks his chair to wake him up. After Black Noir II tells them he has narcolepsy, his boss, Homelander, angrily responds, “*Oh, what the f*ck?*”
- In *Obituary*, after the character with narcolepsy misses a spot while cleaning windows, his client spitefully throws a cake at the window to make him re-do the job.

SUPPORTIVE RESPONSES

Others depicted mixed or supportive responses from others.

- In *My Own Private Idaho*, the character’s best friend knows he has narcolepsy and looks out for him by carrying/dragging him along to safer places.
- In *The Sopranos*, Janice Soprano seems supportive of her boyfriend, Aaron’s narcolepsy. Tony Soprano throws a grape at Aaron’s head as he sleeps at the Thanksgiving table. Everyone laughs and Janice responds, “*Narcolepsy is an ASDA-certified dyssomnia, it’s no picnic.*”
- In *Wake*, Sarita’s cousin is supportive and protective as she navigates her condition, accompanying her so she isn’t alone during her “episodes” of sleepiness. At the same time, Sarita’s friends tease her about falling asleep.
- In *Chicago Med*, doctors and hospital staff make a joke after the patient falls asleep saying, “*I wish I could fall asleep like that.*” But they are responsive to the patient’s concerns.



THE SOPRANOS

CHARACTERS EDUCATING OTHERS

In some instances, characters with narcolepsy responded to rude or dismissive comments by educating another character about the condition.

- In *Wake*, Sarita discloses her condition to a stranger who says, *"That's that thing when people fall asleep for no reason, right? ... I didn't even know that was real."* Sarita responds with *"...most people don't really understand how scary it is to be knocked out for big chunks of time."*
- In *Killer Whales*, a documentary director who is interviewing Squire about being a potential witness to a crime asks, *"Crazy question, were your eyes open?"* Squire explains, *"You know what? Okay fine. Let the truth come out. Uh, yes, you know what? I happen to suffer from type 1 narcolepsy. It is not an easy thing to admit to yourself or to this camera. However, it is true. Three million people worldwide suffer silently in their sleep. Only 25%, honestly, have been correctly diagnosed. It is a difficult thing for me to speak about."*

FAMILY, SOCIAL & WORK CHALLENGES

Characters with narcolepsy often faced family, social, or work-related challenges.

- The premise of *Deuce Bigalow: Male Gigolo*, is that Deuce goes on dates with "undateable" women who pay him to take them out. The character with narcolepsy, Carol, describes, *"It isn't the worst thing you could ever have, I'm just not allowed to fly a plane or drive a car or work in a gun range."*
- In *The Simpsons*, after Homer is diagnosed with narcolepsy, Marge kicks him out of the house because she believes he is using his diagnosis as an excuse to justify further laziness. Homer says, *"How can you kick me out now that I'm sick? Narcolepsy is a serious thing."* Marge replies, *"Maybe because you didn't take it seriously enough."*
- In *Punky Brewster*, Ralph's girlfriend dumps him after he repeatedly falls asleep during a restaurant date, even after he explains that he has narcolepsy.



PUNKY BREWSTER

CHILD AND FAMILY CONTENT

The onset of narcolepsy commonly happens during childhood or adolescence.²⁶ Family-focused programming has the potential to play an important role in shaping children and families' perceptions of the condition, but often involves one-dimensional and stereotypical portrayals.

- In the 2025 live action *Snow White*, the film updates the character Sleepy by identifying him as having narcolepsy with cataplexy, describing that he “falls asleep when worried.” From here, Sleepy falls asleep while fighting, mid-conversation, while standing or falling over dramatically to humorous effect.
- In *Victorious*, the character Tori Vega plays a character with narcolepsy, “Walter Swaine,” in a play. He is portrayed as trying to be a good father but largely ineffective. When he wakes up, he frequently blurts out random things and says he’s “so darn narcoleptic he can’t tell his own sons apart.” At one point, he asks the person portraying his wife in the play, “How could you ever love a sleepy loser like me?”
- *The Mysterious Benedict Society* stood out as a more nuanced representation of narcolepsy in family-oriented content.



VICTORIOUS

26 Chung, I. H., Chin, W. C., Huang, Y. S., & Wang, C. H. (2022). Pediatric narcolepsy-A practical review. *Children*, 9(7), 974. <https://doi.org/10.3390/children9070974>

Dreaming of Accurate Representation:



The Simpsons

“Being a little immodest, when something’s in The Simpsons, a lot of kids tend to see it. So you are planting the seed of what people know about something. It’s the first time they may have heard a reference to narcolepsy in their lives. So I do take it seriously.”

— Al Jean

co-Executive Producer and showrunner of *The Simpsons* at “Sleepless in Hollywood”²⁷

A few months in advance of *The Simpsons* 27th season in 2015, showrunner Al Jean told *Variety* that the premiere episode would see Homer, ever the bumbling oaf, diagnosed with narcolepsy:²⁸

“It’s discovered after all the years Homer has narcolepsy and it’s an incredible strain on the marriage. Homer and Marge legally separate, and Homer falls in love with his pharmacist, who’s voiced by Lena Dunham.”

Project Sleep’s President & CEO, Julie Flygare, tweeted the showrunner, Al Jean, to say, “*I hope you’re not portraying it like any other Hollywood sitcom.*” Jean responded, “*Well, what would I do to avoid that?*”

As Jean recounts in a 2021 interview with Flygare:²⁹

27 Project Sleep. (2025, April 1). *Sleepless in Hollywood? Event at Writers Guild of America West* [Video]. YouTube. <https://www.youtube.com/watch?v=3SKFWWjNbIo>

28 Birnbaum, D. (2015, June 7). ‘Simpsons’ EP Al Jean on Homer’s 2016 vote, another movie & the star he still wants. *Variety*. <https://variety.com/2015/tv/news/simpsons-movie-al-jean-interview-1201514127/>

29 Project Sleep. (2021, June 28). *Narcolepsy goes to Hollywood: Part 1* [Video]. YouTube. <https://www.youtube.com/watch?v=UsKVUtlGSS>

Dreaming of Accurate Representation: *The Simpsons* (cont'd)

“We researched it, we had Homer taking the proper medication. I admit, I think we didn’t research it quite enough initially and talk about what it really is and how serious it is.”

In the 2015 episode “Every Man’s Dream,” Homer is diagnosed with narcolepsy after an accident at the nuclear power plant where he works. The only title in our analysis to visually portray the narcolepsy diagnostic process, the episode shows Homer undergoing a spinal tap (lumbar puncture) before Dr. Hibbert diagnoses him with narcolepsy based on low hypocretin (orexin). The doctor prescribes accurate pharmaceutical treatments, including amphetamines, antiepileptics, and GHB, but Homer falls asleep in line at the pharmacy and returns home drunk.

According to Jean, the writing staff tweaked the episode somewhat in response to input from Flygare:

“[Julie] gave a suggestion, which was really well taken. Marge is always in the right, so we had Marge less sympathetic than she should have been to his condition and we rewrote that.”

Marge, frustrated with Homer’s long-term lack of accountability, seeks marriage counseling and ultimately a trial separation. She believes he is using his narcolepsy diagnosis as an excuse to justify his irresponsible behavior; he *“didn’t take it seriously enough.”*

Ultimately, Homer does retrieve his prescribed medications and begins a relationship with the pharmacist, and the rest of the episode focuses on Marge and Homer’s relationship challenges.

In his interview with Flygare, Jean concluded, *“My hope is that by covering [narcolepsy] in a show that kids would watch... it influences people in some way and will encourage people to take the topic more seriously.”*

Leaders Can Have Narcolepsy:

The Disney family-oriented dystopian adventure series *The Mysterious Benedict Society* features two main characters living with narcolepsy across its two seasons. Both the titular Mr. Benedict, and his evil twin Mr. Curtain have type 1 narcolepsy. Benedict says:

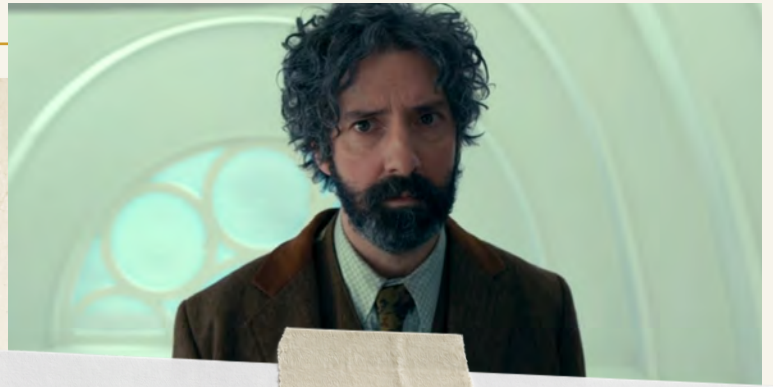
“Well, here’s a helpful fact. I have type 1 narcolepsy with cataplexy. Quite severely, I might add. It’s brought on by extremes... you know, extreme emotions, mainly from a root of joy.”

Curtain has similar symptoms, but triggered by anger rather than joy.

Both characters are drawn in a complex manner, and narcolepsy is not their defining feature. Benedict is portrayed as eccentric but wise and kind, leading a group of orphaned children in attempting to save the world. Curtain is Benedict’s nemesis and a villain, but both are characterized as highly intelligent and capable.

While narcolepsy type 1 does in reality involve cataplexy triggered by emotions, Benedict and Curtain’s cataplexy is inaccurately characterized as suddenly falling asleep or fainting (i.e., exaggerated sleep attacks) rather than muscle weakness while remaining conscious. However, the overall portrayal is nuanced, particularly in comparison to other children and family content, which tends to reinforce myths and perpetuate stigma.

Viewership data for *The Mysterious Benedict Society* is not available, but the series received generally positive reviews. It was nominated for multiple Children’s and Family Emmy awards in 2022 and 2023, including Outstanding Young Teen Series both years. Tony Hale, who portrayed both Benedict and Curtain, won Outstanding Lead Performance in a Preschool, Children’s or Young Teen Program in 2023.



The Mysterious Benedict Society

CONCLUSION & RECOMMENDATIONS

All representations described in this report come from mainstream broadcast, cable, and streaming TV series and films with wide theatrical distribution; they are not obscure examples. Several of the older portrayals have resurfaced on streaming platforms, giving them new life, and the ability to reach new audiences (including children) with stereotypes, stigmas, and myths about narcolepsy. At the same time, streaming represents an opportunity to convey accurate and authentic narratives to diverse audiences who may be unaware that narcolepsy is an actual medical condition and not simply an adjective to describe someone who is tired.

Individuals with narcolepsy often note that the inaccuracy of depictions of narcolepsy in mainstream entertainment led to delays in seeking diagnosis or treatment:



“The doctor came in and said, ‘I think you may have a sleep disorder called narcolepsy.’ ... I heard him say it, but I was like, ‘Yeah, what does he know?’ It didn’t jive with what I knew from Hollywood, from mainstream television and movies. I wasn’t just falling asleep left and right.”

— **Matthew Hornsell**

Rising Voices speaker living with narcolepsy³⁰



“My first thought was I’m not like Mr. Bean in Rat Race. I had seen narcolepsy in movies my whole life but I never thought that could be me. I wish I would have seen someone on TV that was struggling the way I was and they were offered a sleep consult. I didn’t know that existed. I didn’t know that sleep was a specialty of medicine.”

—**Lauren Thomas**

Patient advocate at “Sleepless in Hollywood” event living with narcolepsy³¹

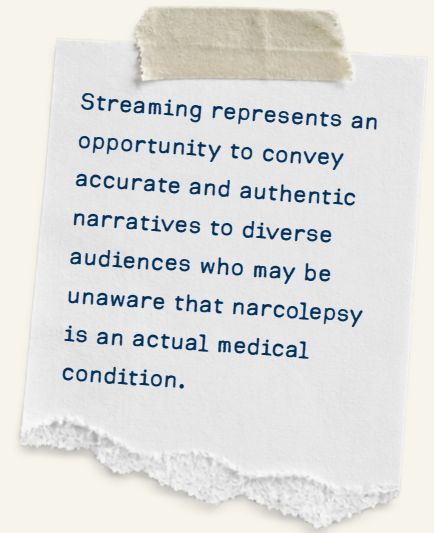
30 Project Sleep. (2020, June 19). *Matthew Hornsell’s Rising Voices of Narcolepsy story sharing event* [Video]. YouTube. <https://www.youtube.com/watch?v=ElsLa8qNLSg>

31 Project Sleep. (2025, April 1). *Sleepless in Hollywood? Event at Writers Guild of America West* [Video]. YouTube. <https://www.youtube.com/watch?v=3SKFWWjNblo>

Indeed, research on portrayals of other health issues suggests stereotypical or inaccurate depictions can increase stigma and reduce help-seeking among audience members.³² Future research might examine the impact of stigmatizing and more nuanced portrayals of narcolepsy on people with the condition, medical professionals, and the general public.

Recommendations for Creatives

To move away from tired and stigmatizing narratives of narcolepsy, we propose the following considerations as a “wake-up call” for writers and other creatives when discussing or portraying the condition:



1. **Use person-first language.** Instead of having a character referred to as “a narcoleptic,” or using the term “narcoleptic” figuratively to connote dullness, talk about “a person living with narcolepsy.”
2. **Avoid exaggerated and cartoonish sleep attacks,** which do not reflect real-life presentation of narcolepsy. Portray the actual symptoms of narcolepsy, such as excessive daytime sleepiness, cataplexy, vivid hallucinations around sleep, and sleep paralysis.
3. **Don’t turn narcolepsy into a punchline.** Narcolepsy is not a joke, but a neurological disorder that affects hundreds of thousands of Americans and millions worldwide.
4. **Skip the “lazy” and “inept” caricatures.** People with narcolepsy hold many roles and identities as parents, partners, friends, colleagues, students, caregivers, etc. Create multidimensional characters whose goals and motivations extend beyond their diagnosis.
5. **Explore stigma and disclosure.** Given high levels of stigma, a character may choose to hide their symptoms or diagnosis from others. This offers opportunities for dramatic tension and character development navigating relationships, trust, and a shifting sense of identity. Consider exploring barriers to care, health inequities, and the experiences of marginalized communities.
6. **Address the diagnosis and treatment of narcolepsy.** Interactions with medical professionals, diagnostic procedures, and treatments are key signals that could help viewers understand narcolepsy is a real medical condition. **Hollywood, Health & Society** provides free access to experts and other resources to help creatives depict narcolepsy and other sleep disorders with accuracy and sensitivity. Contact them at hhs@usc.edu.

32 Korobkova, K., Weinstein, D., Felt, L., Rosenthal, E. L., & Blakley, J. (2023). *Lights, camera, impact: 20 years of research on the power of entertainment to support narrative change*. USC Norman Lear Center Media Impact Project. <https://learcenter.s3.us-west-1.amazonaws.com/NormanLearCenter-Narrative-Change-Research-Review.pdf>

Appendix A: Round 1 Methodology (1983–2021)

Sample Identification

Project Sleep generated the sample in using a two-pronged approach:

- Searching IMDb.com and the internet for the keywords “narcolepsy” and “narcoleptic”
- Reviewing crowdsourced submissions to Project Sleep’s [Sleep Disorders Film and TV Database](#)

The identified titles were categorized as either:

- **Character portrayals.** It is explicitly stated that a visible character has narcolepsy. Though the character may not be formally diagnosed, a viewer would reasonably conclude that the character has the neurological condition of narcolepsy.
 - To avoid inaccurately categorizing all “sleepyhead” characters as having narcolepsy, it was required that “narcolepsy” or “narcoleptic” be explicitly mentioned alongside any visual portrayals of a character falling asleep.
- **Linguistic mentions.** “Narcolepsy” or “narcoleptic” is mentioned in onscreen text or spoken dialogue, but a viewer would not reasonably conclude that it is being applied to a character with the neurological condition of narcolepsy. Meets one or more of the following conditions:
 1. **Metaphorical or figurative use.** Use of the term “narcoleptic” to mean something along the lines of sleepy, lethargic, or lacking energy rather than describing the neurological disorder narcolepsy. Such use may or may not be in reference to a specific character but a viewer would not reasonably conclude the character has a narcolepsy diagnosis.
 2. **Character is hypothetical or theoretical.** The condition is invoked as a generic category or an imagined prototypical individual with narcolepsy. The term serves as a culturally recognizable stereotype rather than a medical description (e.g., “looking like a narcoleptic,” “driving like a narcoleptic old lady”). This includes cases where a character is pretending to have narcolepsy.
 3. **Character exists but is unseen.** The term appears to refer to a character but the character remains unseen so there is no visible portrayal to analyze (e.g., “narcoleptic mouse,” “narcoleptic chef”).

Project Sleep sought out additional examples until saturation was achieved. The sample was narrowed to English-language, widely-distributed, fictional narrative-style content. Shorts, documentaries, unscripted/reality series, stand-up comedy, and talk shows were excluded.

In total, 33 titles (8 films and 25 TV shows) met the inclusion criteria. These included 24 titles with at least one character portrayal of narcolepsy and 9 with at least one linguistic mention of the word “narcolepsy” or “narcoleptic,” as defined above. Four titles portrayed multiple characters with narcolepsy, giving a total of 31 unique characters. The earliest identified title was from 1983.

Table 10.
Content Analyzed in Round 1³³

TV Show/Film Title	Episode(s)	Year	Character or Mention?	Character(s)
<i>Hill Street Blues</i>	S3 E19	1983	character	Vic Hitler
<i>Punky Brewster</i>	S4 E6	1988	character	Ralph
<i>Saturday Night Live</i>	S16 E9	1990	characters (4)	“Narcoleptic Hunks”: Patrick Hawley Haut Mallory Tony Kellogg Audience Member
<i>My Own Private Idaho</i>	Film	1991	character	Mike Waters
<i>Blossom</i>	S5 E15	1994	mention	
<i>Frasier</i>	S5 E15	1998	character	Niles Crane
<i>Deuce Bigalow: Male Gigolo</i>	Film	1999	character	Carol
<i>Gilmore Girls</i>	S1 E10	2000	mentions	
<i>Moulin Rouge</i>	Film	2001	character	The Narcoleptic Argentinean
<i>Rat Race</i>	Film	2001	character	Enrico Pollini
<i>The Sopranos</i>	S3 E8 S3 E9 S3 E10 S6 E4	2001	character	Aaron Arkaway
<i>Rolling Kansas</i>	Film	2003	character	Hunter Bullete
<i>Scrubs</i>	S2 E17	2003	character	Mr. Hilliard
<i>Arrested Development</i>	S1 E19	2004	character	Party Stripper
<i>The Office</i>	S3 E10	2006	mention	
<i>The West Wing</i>	S7 E15	2006	mention	
<i>Wide Awake</i>	Film	2007	characters (3)	Cassie Wade 2 unnamed characters

33 A mention from a 2017 episode of *Girls* was added to the database after Project Sleep conducted the Round 1 analysis. This title was added to the Round 1 sample after the fact.

TV Show/Film Title	Episode(s)	Year	Character or Mention?	Character(s)
<i>CSI: Crime Scene Investigation</i>	S10 E9	2009	character	Bernard Higgins
<i>Shuffle</i>	Film	2011	characters (2)	Orson Milo (father) Lovell Milo (son)
<i>Victorious</i>	S3 E7	2012	character	Tori Vega (playing “Walter Swaine”)
<i>Once Upon a Time in Wonderland</i>	S1 E1	2013	mention	
<i>Perception</i>	S2 E2	2013	character	Wayland
<i>Rizzoli & Isles</i>	S4 E11	2013	character	Judge Kathleen Harper
<i>Modern Family</i>	S5 E21	2014	character	Phil Dunphy
<i>The Simpsons</i>	S27 E1	2015	character	Homer Simpson
<i>Lucifer</i>	S1 E4 S2 E7	2016	mentions	
<i>Girls</i>	S6 E2	2017	mention	
<i>The Dragon Prince</i>	S2 E4 S2 E6	2019	character	Captain Villads
<i>The Marvelous Mrs. Maisel</i>	S3 E4	2019	mention	
<i>Ode to Joy</i>	Film	2019	character	Charlie
<i>Central Park</i>	S1 E1	2020	character	Dog Walker
<i>Dr. Who</i>	S13 E3	2021	mention	
<i>The Mysterious Benedict Society</i>	S1 E1 S1 E8 S2 E5	2021 2022	characters (2)	Mr. Benedict Mr. Curtain

Coding Procedure

All 33 titles were independently analyzed by three members of Project Sleep’s research team, including a board certified BSM specialist, a public health professional, and a person living with type 1 narcolepsy with cataplexy.

Genre was categorized according to the Internet Movie Database classification system. All titles evaluated for the use of narcolepsy for comedic effect and/or as a put down. The 24 titles with character portrayals were evaluated for:

- Symptoms shown or mentioned
- Inclusion of diagnosis, healthcare professions, and treatments
- The character’s nature and likeability

A fourth team member identified a few minor discrepancies, which were resolved by consensus in a group setting. Impacts on relationships, social life, work, and school, as well as the character arc and complexity, were analyzed more qualitatively.

Appendix B: Round 2 Methodology (2021–2025)

Sample Identification

Closely mirroring Project Sleep’s methods, the USC Norman Lear Center generated the round 2 sample in 2026.

We searched the Norman Lear Center’s Script Database for TV and film transcripts from 2021–2025 that featured the keywords “narcolepsy” or “narcoleptic.” Two titles from 2021 (five episodes of *The Mysterious Benedict Society* and one episode of *Doctor Who*) had already been included in Project Sleep’s round 1 sample and were therefore excluded from round 2.

We supplemented this search by reviewing Project Sleep’s internal database of sleep disorder depictions and conducting secondary online research using IMDb, IMDbPro, The Movie Database (TMDb), Google News, TV Tropes, Springfield! Springfield!, and Forever Dreaming. We also queried publicly available large language models (ChatGPT and Claude) to help verify that we had captured relevant film and television storylines.

In total, 23 titles (7 films and 16 TV shows) met the inclusion criteria. These included 10 with at least one character portrayal of narcolepsy and 14 titles with linguistic mentions of the word “narcolepsy” or “narcoleptic.” One title, *Chicago Med*, included both a character and a mention and thus was counted separately in each category

Table 11.
Content Analyzed in Round 2

TV Show/Film Title	Episode	Year	Character or Mention?	Character(s)
<i>Call the Midwife</i>	S10 E2	2021	Mention	
<i>The Flash</i>	S7 E10	2021	Mention	
<i>Mr. Mayor</i>	S1 E7	2021	Mention	
<i>Queens</i>	S1 E6	2021	Mention	
<i>Anatomy of a Scandal</i>	S1 E2	2022	Mention	
<i>Chicago Med</i>	S7 E14	2022	Mention	
<i>Killer Whales</i>	Film	2022	Character	Squire
<i>The Lake</i>	S1 E5	2022	Mention	

<i>Leopard Skin</i>	S1 E4 S1 E6	2022	Character	Batty
<i>Leverage: Redemption</i>	S2 E1	2022	Mention	
<i>Roald Dahl's Matilda the Musical</i>	Film	2022	Mention	
<i>Strays</i>	S2 E8	2022	Mention	
<i>The Recruit</i>	S1 E2	2022	Character	Janus
<i>Waking Up Dead</i>	Film	2022	Mention	
<i>Haunted Mansion</i>	Film	2023	Mention	
<i>Not Your Romeo & Juliet</i>	Film	2023	Mention	
<i>Wake</i>	Film	2023	Character	Sarita Matthews
<i>The Boys</i>	S4 E3 S4 E7	2024	Character	Black Noir II
<i>Adventure Time: Fionna and Cake</i>	S2 E6	2025	Mention	
<i>Chicago Med</i>	S11 E7	2025	Character	Betsy
<i>Obituary</i>	S2 E1	2025	Character	Window Cleaner
<i>Snow White (2025)</i>	Film	2025	Character	Sleepy
<i>St. Denis Medical</i>	S2 E5	2025	Character	Kyle
<i>Stumble</i>	S1 E1	2025	Character	Madonna

Coding Procedure

The 23 titles were split between four members of the Norman Lear Center's research team and analyzed using a codebook modeled on Project Sleep's original coding sheet. Variables include:

- Use of narcolepsy for comedic effect
- Character role size
- Symptoms and triggers
- Seeing a doctor
- Diagnosis
- Treatment
- Changes over time
- Impacts on work, education, and social life
- Stigmatization
- Disclosure and response
- Character attributes and complexity

The lead researcher was responsible for reviewing coding, and identifying and resolving minor discrepancies. In some cases, the research team modified open-ended questions from round 1 to include quantitative variables, alongside qualitative examples.

USC Annenberg
Norman Lear Center

projectsleep

a representation wake-up call

NARCOLEPSY

in Fictional Narrative Entertainment

www.learcenter.org



www.project-sleep.org



Creative Commons
Attribution-NonCommercial-
NoDerivatives 4.0 International