

Cognitive behavioral therapy is an effective treatment for chronic insomnia

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A majority of people experiencing chronic insomnia can experience a normalization of sleep parameters through the use of cognitive behavioral therapy for insomnia (CBT-I), according to a research abstract that will be presented at SLEEP 2009, the 23rd Annual Meeting of the Associated Professional Sleep Societies.

Results indicate that 50 percent to 60 percent of participants with chronic sleep onset insomnia, sleep maintenance insomnia or both experienced remission of their primary sleep difficulty. Among the 64 participants who completed five or more treatment sessions, there were significant improvements on presenting complaints, as well as all other measures, including sleep efficiency, average nightly awakenings, total sleep time and average nights of sleep medication use per week.

According to lead author Ryan Wetzler, Psy.D, C.B.S.M. of Sleep Medicine Specialists in Louisville, Ky., results of the study indicate that multi-component CBT-I can be an effective approach for those experiencing chronic insomnia even when anxiety and depression are part of the clinical picture.

"CBT-I teaches strategies to 'reset' the bodily systems that regulate sleep," said Wetzler. "Since these systems also play a role in regulation of mood, pain and other bodily processes, skills developed through CBT-I may also have a positive impact on mood, anxiety, pain and other associated medical or psychiatric conditions."

The study gathered data from 115 patients who had visited the Insomnia Treatment Program and Behavioral Sleep Medicine Clinic. Study participants included those with complaints of prolonged (more than 30 minutes) sleep onset latency (SOL), sleep maintenance insomnia (SMI), or both sleep onset and sleep maintenance [insomnia](#) (SOMI), and who had attended at least two treatment sessions. Participants were between the ages of 14 and 81 years, and 65 percent of the sample was female.

The multi-component, CBT-I program included comprehensive evaluations of patients' habits, attitudes and knowledge concerning sleep. The program was designed to involve six to seven treatment sessions. Specific strategies included education on sleep regulating systems, sleep scheduling recommendations, sleep hygiene education, sleep consolidation therapy, stimulus control therapy, relaxation training, cognitive therapy and mindfulness training.

According to Wetzler, a related study found that of participants who completed at least four treatment sessions of CBT-I, 78 percent of those using sleep medication for three or more nights per week were able to completely discontinue use of sleep medications. Findings from this study indicate that those who discontinued use of sleep medications not only stopped using drugs to sleep but also slept better than when they were taking sleep medications.

Source: American Academy of [Sleep](#) Medicine ([news](#) : [web](#))

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