

Cognitive behavioral therapy for insomnia reduces suicidal thoughts in veterans

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A new study is the first to show that the treatment of insomnia in veterans is associated with a significant reduction in suicidal ideation.

Results show that suicidal ideation decreased by 33 percent following up to six sessions of [cognitive behavioral therapy](#) for insomnia (CBT-I). Further analysis found that the reduction in insomnia severity achieved

during CBT-I was associated with a concurrent decrease in the odds of suicidal ideation. This relationship remained significant after controlling for potential confounders such as change in [depression severity](#).

"It was striking to see that the reduction in insomnia severity was associated with reduced [suicidal ideation](#) even after controlling for improvement in depression severity," said co-lead author Bradley Karlin, PhD, ABPP, who is currently Chief of Mental Health and Aging at the Education Development Center, Inc. (EDC). Karlin served as National Mental Health Director for Psychotherapy and Psychogeriatrics in the U.S. Department of Veterans Affairs Central Office at the time the evaluation was conducted. "The results suggest that effective treatment of insomnia with CBT-I is an important target for reducing suicide risk among veterans and others at risk for suicide," said Karlin.

According to Karlin, the wide-ranging effects of CBT-I that were found in the study were eye-opening. In addition to improving insomnia and reducing suicidal thoughts, CBT-I led to improvements in depression and quality of life, which suggests that focusing greater attention on detecting and treating insomnia could produce substantial public health benefits.

Study results are published in the February issue of the journal *Sleep*.

"Chronic insomnia is especially common among veterans who have put their lives at risk in service to our country," said American Academy of Sleep Medicine President Dr. Timothy Morgenthaler. "This study emphasizes that effectively treating insomnia can be life-changing and potentially life-saving for veterans who may be struggling with problems such as depression, [suicidal thoughts](#) and posttraumatic stress disorder."

The American Academy of Sleep Medicine reports that about 10 percent of people have [chronic insomnia](#) disorder, which involves a sleep

disturbance and associated daytime symptoms that have been present for at least three months. About 15 to 20 percent of adults have short-term insomnia disorder, and more than half of veterans who served in Iraq or Afghanistan report symptoms of insomnia.

The evaluation included a total of 405 veterans with diagnosed [insomnia](#) disorder who received CBT-I in routine primary care and [mental health](#) treatment settings. The majority of participants were men, and the mean patient age was 52 years. About 83 percent of [veterans](#) reported conflict experience, including 150 who served in Vietnam and 83 who served in Iraq or Afghanistan as part of Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn. Patients received CBT-I from therapists newly-trained in the therapy as part of the national dissemination of CBT-I in the U.S. Department of Veterans Affairs health care system. According to Karlin, CBT-I's effectiveness and feasibility for implementation suggest that there is considerable opportunity for broad dissemination of CBT-I in other health care systems.

The Centers for Disease Control and Prevention (CDC) reports that suicide accounts for more than 38,000 deaths each year, making it the 10th leading cause of death in the U.S. Help is available for anyone who is feeling distressed or hopeless, thinking about death or wanting to die, or worrying about someone who may be suicidal, by contacting the National Suicide Prevention Lifeline at 1-800-273-TALK (8255) or <http://www.suicidepreventionlifeline.org>.

More information: "Effects of Cognitive Behavioral Therapy for Insomnia on Suicidal Ideation in Veterans,"

www.journalsleep.org/ViewAbstract.aspx?pid=29866

Commentary, "Resilience and Readiness through Restorative Sleep,"

www.journalsleep.org/ViewAbstract.aspx?pid=29855

Provided by American Academy of Sleep Medicine

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