

Helping new moms sleep better without medication

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Poor sleep during pregnancy and in the first months post-birth can have long lasting psychological and physical consequences for both mother and baby. New research from Monash University has found that a non-drug sleep program, using Cognitive Behavioral Therapy (CBT), can significantly reduce sleep problems in women in the final trimester of

their pregnancy and up to 2 years after the birth of their baby.

Importantly, the study found that in [women](#) who suffer from insomnia symptoms during [pregnancy](#), the benefits of CBT in enhancing the quality of their sleep lasted throughout the first two years post-birth.

The study, led by Dr. Bei Bei, from Monash University's Turner Institute for Brain and Mental Health, and published today in the journal, *Psychological Medicine*, suggests that CBT for better sleep should become a part of routine perinatal care.

Up to 100,000, or one in every three, women who give birth in Australia this year are likely to experience significant sleep disturbance and symptoms of insomnia. According to Dr. Bei, 60 percent of women experience sleep disturbance during the latter parts of pregnancy due to physiological changes such as fetal growth, hormonal changes and restless leg syndrome—and for many women with insomnia during pregnancy, sleep issues could persist beyond two years after the birth.

"Sleep disturbance has negative consequences in new mothers including mood disturbance, fatigue, lower daytime functioning, and pregnancy/birth complications," she said.

The researchers—also from Stanford University and the Royal Women's Hospital—studied 163 women who had not had a baby previously—in their last semester until two years post birth, to determine whether a sleep intervention program using Cognitive Behavioral Therapy (CBT) improved their sleep over this time. Half of the volunteers received the CBT while the remaining women acted as controls without the intervention.

According to Dr. Bei, "CBT is consistently shown to be efficacious in improving sleep and reducing symptoms of insomnia—comparable to

medication short-term, but much better than medications long-term," she said.

"However, CBT for better sleep is largely inaccessible, and currently, not part of current perinatal care."

The [pilot study](#) published today found that receiving CBT in the latter part of pregnancy and the first months of having a new baby lead to:

- Less severe insomnia
- Less sleep disturbance
- Less sleep related impairment (e.g., fatigue, sleepiness) - both at the end of pregnancy and two years after the birth

In particular those participants who had significant insomnia at the beginning of the study benefited substantially from the CBT programs, compared to controls.

Dr. Bei and her team were recently awarded a Clinical Trials and Cohort Studies grant from the National Health and Medical Research Council to conduct a larger trial to evaluate the effectiveness, cost-effectiveness, and implementation potential of a scalable CBT sleep program "with the potential to achieve sustainable integration in routine perinatal care."

More information: Bei Bei et al, Improving perinatal sleep via a scalable cognitive behavioural intervention: findings from a randomised controlled trial from pregnancy to 2 years postpartum, *Psychological Medicine* (2021). [DOI: 10.1017/S0033291721001860](https://doi.org/10.1017/S0033291721001860)

Provided by Monash University

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