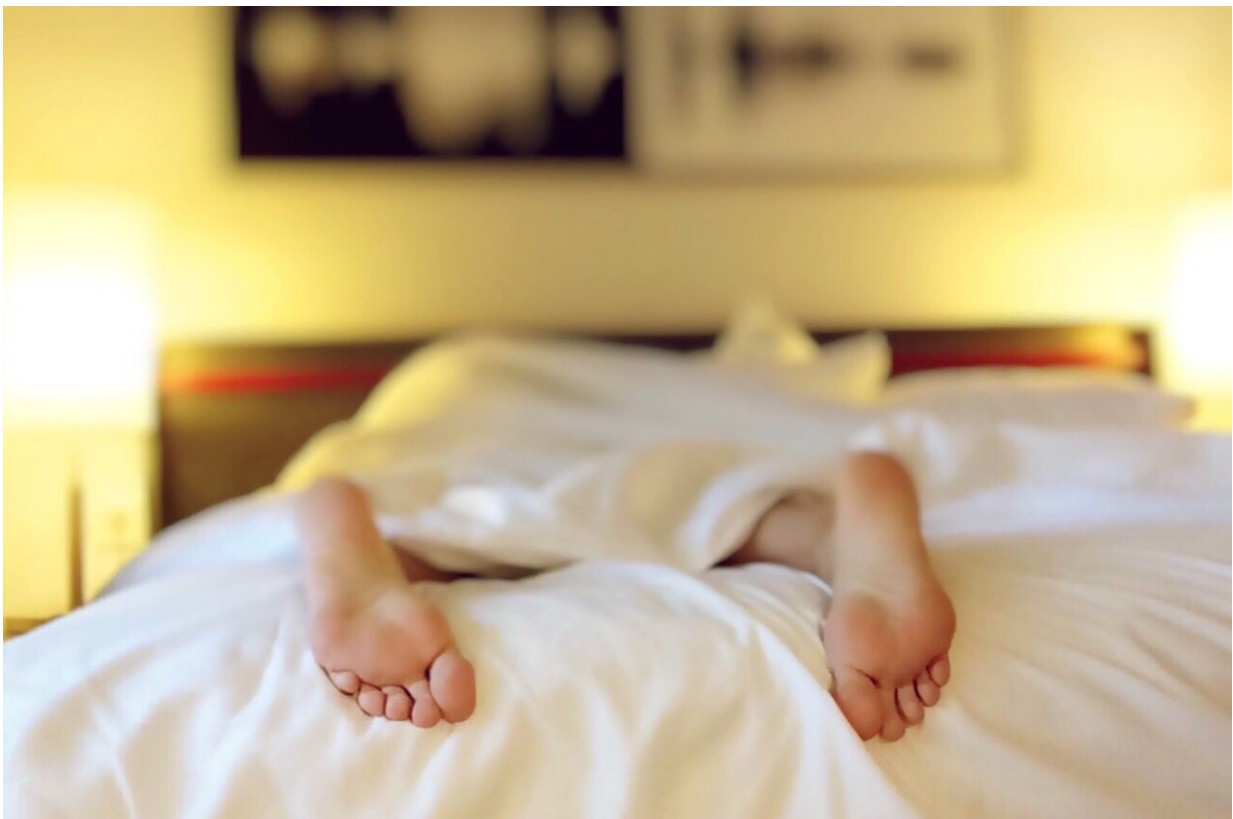


Insomnia symptoms may predict subsequent drinking in adults

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People with symptoms of insomnia may be likely to increase their drinking over time, according to a study [published](#) in *Alcohol: Clinical and Experimental Research*.

In the study of adult drinkers, people who had worse [insomnia symptoms](#) at the outset of the study tended to increase the amount they drank and the number of times they binge drank during the subsequent year. The researchers found that, even at subclinical levels, insomnia symptoms were a significant predictor of future drinking in adults, suggesting that insomnia symptoms should be addressed to help reduce the risk of problem drinking.

Researchers examined how various sleep and circadian characteristics in adults who drink may influence their alcohol use over a year. They compared participants' self-reports of [alcohol consumption](#) at three-month intervals to baseline measures of insomnia severity, [sleep duration](#), circadian misalignment, and other characteristics.

Only self-reported insomnia severity and objectively measured total sleep time predicted future alcohol use. Greater severity of insomnia symptoms was associated with a greater number of weekly drinks and a higher number of monthly binge drinking episodes. Although, overall, participants' insomnia symptoms were relatively low in severity, these symptoms were still predictive of later drinking.

The authors suggest that insomnia symptoms may be a target for addressing problem drinking. Cognitive behavioral therapy has been shown to be effective in treating insomnia, but prior studies show mixed results on whether treating insomnia is effective in reducing problem drinking.

The study authors urge caution in interpreting the finding that longer sleep time predicts alcohol use, which is inconsistent with previous studies and may be explained by the longer sleep time in the heavier drinkers in the study.

Participants were adult drinkers aged 21 to 42, including light drinkers who drank one to five drinks per week and people who drank heavily, that is, 10 or more drinks per week.

For one week at the outset of the study, participants wore a wrist monitor to track sleep and activity, and kept diaries of sleep, caffeine, alcohol, and medication use. This was followed by a day-long laboratory visit where they were assessed using objective measures for insomnia, circadian preferences, melatonin onset and other mood, alcohol, and circadian and sleep factors.

Following the baseline assessment, participants reported how much they were drinking and completed online questionnaires about alcohol effects, insomnia, and mood.

Prior studies have suggested that sleep issues, as well as [circadian rhythms](#), may contribute to risk for alcohol problems, although most of the prospective studies have been of adolescents and [young adults](#). This longitudinal study of adults with a range of drinking behaviors uses objective sleep and circadian measures.

The study's sample size of 78 is the largest to date to examine the association between objective circadian measures and alcohol use in adults. Study participants had minimal depression and anxiety, which may not reflect typical drinkers, and were mostly White, factors that limit the generalizability of the findings.

More information: Helen J. Burgess et al, Do sleep and circadian

characteristics predict alcohol use in adult drinkers?, *Alcohol, Clinical and Experimental Research* (2024). [DOI: 10.1111/acer.15280](https://doi.org/10.1111/acer.15280)

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