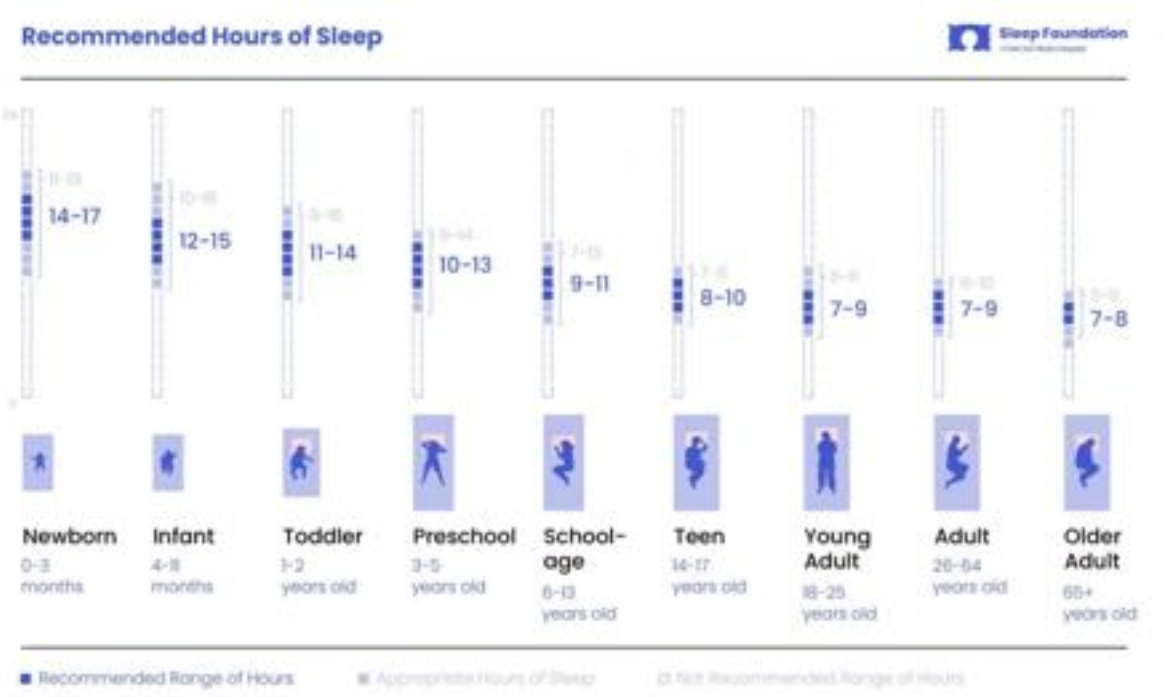
Therapy

What Is Normal Sleep?

There is no unified theory about the function of sleep. The current consensus is that sleep is essential for good health, mental and emotional functioning. It is very important for repair and maintenance of physiological, biochemical and neurological functions. We know that sleep is needed, because when people do not get an adequate amount of sleep, they suffer negative consequences during the day (e.g., reduced alertness, compromised immune function), and then sleep longer than usual the following night (sleep rebound). People often ask, “how much sleep do I need?” from the current state of the science, the answer is not clear. Sleep duration varies with age and personal needs, depending on physical activity and other factors. Please see below a representation of recommended hours of sleep by the Sleep Foundation.



When good sleepers go to sleep at night, they usually experience a period of relaxed wakefulness. The length of this period of relaxed wakefulness varies from one person to the next, but it is typically less than 30 minutes. During a typical night of sleep, NREM and REM sleep states and stages occur in consistent and predictable cycles. Generally speaking, there are specific physiological processes that the body and brain need to maintain good health and there is a certain time required in each of these sleep states to achieve that.

If you have been suffering with Insomnia, through CBTi, we will guide you to achieve your goal to a more normal sleep. CBT-I is collaborative and requires patient engagement and commitment which will improve efficiency of therapy and equip the individual with lifelong skills to achieve good quality sleep.

CBTi Components

Therapy sessions will include the following components, delivered in a personalised order and/or combination to best fit individual needs and deliver optimal therapy outcomes:

Sleep Hygiene

Quality of sleep has been impacted by the new normals of life - stressful jobs and the difficulty switching work off, 24/7 availability of information and advice, push messaging and targeted marketing, and enabling most of this is the smartphone. These are fantastic devices that have opened up the world - but they do come with a price.

From the effect of the screen itself on sleep quality, to the interruption of sleep by constant notifications, it has to be recognised that smartphone use has impacted sleep quality for many people. Many of the basics of sleep hygiene have got lost in the data driven age.

Try to remember some of the basics of sleep hygiene:

- Stick to a routine
- Avoid the blue light of smart devices before bedtime
- Avoid unnecessary stimulation before bedtime
- Avoid caffeine after lunch
- Maintain daytime exposure to natural light
- Don't watch television in the bedroom

Consumer vs Medical Reports

There is a huge market for apps and devices that claim to track your sleep quality and quantity. The smart wristwatch is a prime example of a consumer product that has been 'upgraded' to a type of medical device. It is worth remembering how little data these devices record in relation to how much information they provide in their sleep reports. The simple truth is that if these devices could do what they claim, as accurately and simply as the marketing suggests, they would just be handed out by the NHS and there would not be any waiting lists for sleep testing. Using these devices can even cause harm to some people who become fixated by the numbers produced, with an overall worsening of sleep the outcome, rather than any of the claimed benefits.

Sleep restriction therapy

Sleep restriction therapy (SRT) – a somewhat misleading term as this component does not restrict the amount of sleep you already achieve, just the time in bed you have to achieve it. In other words, time in bed is restricted. This is worked out on an individual basis over the course of therapy. With the information you provide, together we work out the best way to increase your total sleep time (TST) and improve sleep efficiency (SE). Sleep restriction therapy is done by first reducing the time in bed to be equal to the average amount of time that you report currently sleeping based on sleep diary data (but never below what will be safe) and avoiding daytime naps.

Stimulus control

Stimulus control therapy (SCT) – sleep can be strongly associated with specific and learned behaviours. SCT deals with removing unhelpful habits and beliefs associated with sleep (perpetuating factors) and relearning useful behaviours. We determine the rules that work best for you and your current lifestyle or other considerations when implementing SCT. Stimulus control therapy reverses conditioned arousal by strengthening the bed as a cue for sleep. Patients are advised to use the bed and bedroom only for sleep and intimate relationships, and to wake up at the same time every morning, regardless of the amount or quality of sleep.

Cognitive therapies

CBTi includes strategies for helping patients reduce their worries and intrusive thoughts when in bed, since these are incompatible with sleep. Worries and other unpleasant thoughts that are experienced in bed also exacerbate insomnia, because they weaken the bed as a cue for sleep. Techniques include imagery or distraction, cognitive control techniques or restructuring approach. Some of these will work better for some people than for others and will be discussed with your therapist as you proceed through the course.

Relaxation techniques

There is no single relaxation method that is best for everyone. Progressive muscle relaxation, meditation, and diaphragmatic breathing can all help calm an active mind. Together, we can select a relaxation method that best fits you, and the therapist should recommend practice during the wind-down period. Playing white noise is also helpful for some people.