Session 1
Understanding Insomnia
Lesson 1: Introduction to Conquering Insomnia

What Is Insomnia?
Let’s start by defining insomnia. Insomnia means not getting enough sleep or not getting good sleep for one or more of the following reasons:

• Having a hard time falling asleep
• Having a hard time staying asleep during the night
• Waking up too early in the morning
• Feeling tired and unrefreshed in the morning

Research shows that one third of adults have insomnia every night, and half face this problem at least a few nights per week.

Why Medicine Is Not the Answer
Although many people rely on sleeping pills to treat their insomnia, the use of sleep medicine may not be good for treating long term insomnia for many reasons:

• They are only somewhat helpful and tend to become less helpful over time.
• They have many side effects that can outweigh their benefits.
• People can become dependent on them, needing the pills to fall asleep.
• They do not treat the causes of insomnia.
• Insomnia returns when you stop using the sleeping pills.

Cognitive-Behavioral Therapy
The good news is there is something that works well to treat insomnia. It’s called Cognitive Behavioral Therapy, or CBT. Using CBT, you can change learned thoughts and behaviors that are keeping you from getting a good night’s sleep. CBT helps people who have a hard time sleeping learn to:

• Change stressful, untrue thoughts about sleep
• Change behaviors that keep them awake
• Improve relaxation skills
• Improve lifestyle habits that affect sleep

Effectiveness of CBT
Research shows that CBT is even more effective than sleeping pills for insomnia. In fact, 75% of people with insomnia will greatly improve their sleep using CBT. Three studies that have directly compared CBT to sleeping pills found that CBT was more effective. Unlike sleeping pills, the improvements from CBT last long after the treatment is over, and CBT doesn’t have any of the side effects of sleeping pills.
CBT gets these results because it's based on a simple yet powerful concept: insomnia is caused by learned thoughts and behaviors that can be unlearned, or changed.

This program will show you how to overcome your insomnia using CBT.

The Healthy Sleep CBT Program
This 5 session program begins with Session 1 and progresses through Session 5. After each session, you should complete the sleep diary that you received with this program.

For the best results, plan to spend at least a week in each session, trying many or all of the activities before you move on to the next session. Although all the activities in these sessions can help you sleep better, the most powerful skills are found in sessions 1 through 4.

Five Sessions, Five Weeks
The sessions in this program are organized over a five-week period as follows.

Session 1:
• Basic facts about sleep
• Understanding your insomnia

Session 2:
• Sleep scheduling
• Stimulus control techniques

Session 3:
• Changing your thoughts
• How to stop using sleeping pills

Session 4:
• Daytime relaxation techniques

Session 5:
• Bedtime relaxation techniques
• Lifestyle changes to help sleep.
Lesson 2: Basic Facts about Sleep

Understanding Sleep

It helps to understand basic facts about sleep before you start CBT techniques. First, let’s talk a little bit about the five stages of sleep.

Stage 1 is a drowsy, relaxed state between being awake and sleeping. Breathing slows, muscles relax, heart rate drops. Most people who are awakened from this stage will report that they were “drifting off” but were not really asleep.

Stage 2 is deeper sleep than Stage 1 but still light sleep. You may feel awake during Stage 2 sleep. This means that, on many nights, you may be asleep and not know it.

Stage 3 and Stage 4, or Deep Sleep. It is very hard to wake up from Deep Sleep because this is when there is the lowest amount of activity in your body. After Deep Sleep, we go back to Stage 2 for a few minutes, and then enter Dream Sleep.

Dream Sleep, also called REM (rapid eye movement) sleep, is when you dream. Because Dream Sleep is such an active period for the brain and body, we are more likely to wake up from this sleep stage and feel more alert than Deep Sleep. During this stage, your brain acts like it is awake.

Sleep Cycles

We get most of our Deep Sleep during the first half of the night and most of our Dream Sleep during the last half of the night. And because sleep grows lighter in the second half of the night, there is more of a chance of waking up then.
Functions of Sleep Stages

Now we’ll explore what each stage of sleep does and the benefits it provides.

We’ll start with Deep Sleep (Stages 3 & 4)

Deep Sleep provides the brain and body with important rest. It renews your energy – both body and mind, and is the most important stage of sleep. If we are deprived of sleep, the brain will recover or “make up” Deep Sleep first. Loss of Deep Sleep produces the greatest effect on daytime functioning compared to other stages of sleep.

Dream Sleep is when your brain saves newly learned information into memory.

Stage 2 sleep is a milder form of dream sleep that helps renew your energy.

Stage 1 sleep is deep relaxation that helps your mind and body get ready for sleep.

Sleep and the Brain: Wake System and Sleep System

So far, we’ve looked at the five stages of sleep, now let’s talk about the wake system and sleep system.

- The wake system makes you feel alert during the day
- The sleep system makes you sleep at night

The wake system is strongest for about 16 hours a day, while the sleep system is stronger for the remaining 8 hours of the day. The longer the wake system is “on” during the day (that is, the more waking time we accumulate during the day), the greater the drive or pressure for sleep and the better we sleep.

Sleep and the Brain: Internal 24-hour Clock

Your brain and body have a 24-hour clock. This affects sleep in several ways.

- Your body temperature is controlled with the release of a hormone in the brain called “melatonin”.
- When sunlight enters the eyes, the amount of melatonin goes down, which makes you feel awake and alert.
- Body temperature goes up during the day except for a short dip in the afternoon, and then is the highest around 6PM.
- We are most alert in the late morning and early evening when body temperature is highest.
- At nighttime, light stops entering the eyes, which causes melatonin levels to go up. Body temperature drops, alertness wanes, and we get sleepy.
- Your body temperature keeps going down and reaches its daily low at around 4AM; it then gets us ready for waking up by starting to rise before sunrise.
Lesson 3: The Various Types of Insomnia

Definitions and Diagnosis
Now let’s talk about the various types of insomnia.
When you can not fall asleep easily, it is called sleep-onset insomnia.
Sleep-onset insomnia means that you need at least 30 minutes to fall asleep on average.
Sleep maintenance insomnia means that you wake up during the night and stay awake for at least 30 minutes on average.
To be called insomnia, a person must also feel tired the next day and not do as well with daily activities as they normally do.
Some people do not have difficulty falling or staying asleep, but complain of poor sleep quality.

Strengthening the Sleep System
No matter which type of insomnia you have, people with insomnia have a wake system that is too strong and a sleep system that is too weak.
This program will teach you to make your sleep system stronger and weaken your wake system. This will help you fall asleep and stay asleep at night more easily.

Types of Insomnia
Sleep-onset Insomnia
needing at least ½ hour to fall asleep on average
Sleep maintenance insomnia
waking up during the night and staying awake for at least ½ hour
Lesson 4: How Chronic Insomnia Develops

Starts as a Short-term Problem
So, how do you get chronic insomnia? It starts as short-term insomnia. Not being able to sleep for a few days or weeks is normal, especially if you have stress in your life. Stress can be brought on by major life events or minor daily hassles. Short-term insomnia can also be caused by other factors, such as jet lag. But if you can not sleep for a month or longer it is called chronic insomnia. It can affect you a few nights per week or most nights of the week, and can happen off and on in cycles.
Short-term insomnia turns into chronic insomnia when you:
• Worry about sleep loss
• Link your bed with wakefulness
• Spend too much time in bed
• Try to “force” sleep
• Get out of bed in the morning at inconsistent times

Medical and Mental Health Problems
Although medical and mental health problems can cause insomnia and disturb sleep, they usually do not play a primary role in most cases of chronic insomnia.

If you think that you have a medical or mental health problem contributing to your insomnia, or if you have not seen your doctor in a while, call to make an appointment.

Sleeping Pills
Because sleeping pills are such a common treatment for insomnia, let’s review some important facts about sleep medications:

There are three types of sleeping pills:
• Benzodiazepine sedative hypnotics (BZDs) or similar pills
• Sedating antidepressants
• Over-the-counter medicines

Regular use of sleeping pills—particularly BZDs—can be habit-forming and lead to side effects such as:
• Lighter sleep (less deep sleep and dream sleep, and more Stage 2 sleep)
• A “hangover” effect the following day that can affect coordination, alertness, memory, and thinking
• Withdrawal symptoms (like anxiety) if you suddenly stop taking the medicine
• Needing larger and larger doses for the drug to work.

Sleeping pills can be good for:
• Short-term insomnia
• On and off use for chronic insomnia

You should also know that the effects of sleeping pills are partly due to a “placebo” effect. This means that the effect of a sleeping pill is due in part to your belief that the pill will work.
Lesson 5: Insomnia Self-Assessment and Sleep Diary

Your Own Insomnia Self-Assessment

Now that you know some basics about sleep and insomnia, it’s a good time to take a closer look at your own sleep patterns and what might be causing them. This is the first step in reaching your goal of a better night’s sleep.

Determining Baseline Sleep Pattern

A great way to figure out your sleep pattern is to keep a sleep diary for one week. Keep in mind that the sleep diary is not meant to make you watch the clock. Keep the diary somewhere other than your bedroom and make sure that any clocks in your room are facing away from you or are across the room, so that you do not watch the clock at night. Clock-watching can disturb your sleep by making your stress level go up.

Medical Problems and Drugs

What about medical problems and drugs that might be affecting your sleep? Well, you might be surprised to learn that medical problems are usually not the main cause of chronic insomnia, but these medical problems and drugs can disturb sleep.

- Angina, asthma, bronchitis, emphysema and their medicines
- Allergies, indigestion, reflux, or ulcers
- Bladder problems, arthritis, chronic pain, or headaches
- Epilepsy, hyperthyroidism, kidney disease, diabetes or dementia
- Menopausal hot flashes or premenstrual syndrome (PMS)
- Pain relievers that contain caffeine, prescription diet pills, or steroids

If you have any of these medical problems, make sure you talk to your doctor to see if they are affecting your sleep.

Mental Health Issues

In additional to some medical problems, certain mental health issues can also affect your sleep.

Although mental health problems are not the main cause of most cases of chronic insomnia, insomnia is a common symptom of other disorders such as:

- Depression
- Anxiety
- Panic Disorder
- Post-Traumatic Stress Disorder (PTSD)

If you think you have any of these mental health problems, you should talk to your doctor.
Sleep Disorders
Finally, there are certain underlying sleep disorders that may also cause insomnia, although, again, they are not usually the main cause.

- **Sleep Apnea** – pauses in breathing that can occur hundreds of times per night. Symptoms include loud snoring, gasping for air, excessive daytime sleepiness.

- **Periodic Limb Movements** – twitching, jerking or kicking of legs or arms that last from a few minutes to several hours.

- **Delayed Phase Disorder** – not being able to fall asleep until 3 or 4AM and then sleeping seven or eight hours until 10 or 11AM.

If you think you have any of these disorders, talk to your doctor.

Conditions Affecting Sleep

**Medical Problems**
- Angina, asthma, bronchitis, emphysema and their medicines
- Allergies, indigestion, reflux, ulcers
- Bladder problems, arthritis, chronic pain, or headaches
- Epilepsy, hyperthyroidism, kidney disease, diabetes or dementia
- Menopausal hot flashes or premenstrual syndrome (PMS)
- Pain relievers that contain caffeine, prescription diet pills, or steroids

**Mental Health Issues**
- Depression
- Anxiety
- Panic Disorder
- Post-Traumatic Stress disorder

**Sleep Disorders**
- Sleep Apnea
- Periodic Limb Movements
- Delayed Phase Disorder
Lesson 6: Goals for Week 1

Daily Sleep Diary
Now that you’ve completed Session 1, your goal this week is to complete the sleep diary each morning when you wake up.
Remember, keeping your diary for one week is the first step toward getting to your goal.

Key Concepts
Chronic insomnia is caused by learned thoughts and behaviors that can be unlearned.
CBT teaches you to strengthen your sleep system and weaken your wake system.

Goal
Enter data for seven nights in your Sleep Diary